by bars running across the top and along the bottom. In pediculosis the clothes should be baked or boiled. In scleroderma flannels are desiderated. While clothing cannot be strictly classed as a line of dermatological treatment, careful and minute attention to it will certainly add to its success.

Betrospect Department.

QUARTERLY RETROSPECT OF MEDICINE.

BY R. L. MACDONNELL, M.D.,

Professor of Clinical Mediciae in McGill University; Physician to Montreal General IIospital.

The Indications against High Altitude in Phthisis .- The editor of the Lancet (Oct. 4th, 1890) draws attention to the difficult question of the selection of winter quarters, and not inopportunely recalls some of the pathological conditions which are a bar to the recommendation of the high altitude stations to the consumptive. It would be a great gain if no case were sent to the mountains except those for which experience warrants us in anticipating benefit, and if the notoriously unsuitable cases could be excluded. The first point to be considered is the extent of the pulmonary lesion. No case with extensive disease of the lungs is suitable for the mountains. The atmospheric conditions and mode of life at high altitudes are all of a nature to stimulate respiration and throw an additional strain upon the lungs. Life at high altitudes can operate beneficially only where the destruction of lung tissue is very limited in amount, and where there is still a sufficient amount of sound tissue to respond to the stimulus thrown upon it. If the lungs be extensively diseased, high altitude life will probably excite troublesome dyspnœa, prevent out-door exercise, and not only fail to retard the progress of the disease, but not even confer the palliation of symptoms which in advanced stages of phthisis may be expected from a soft and mild climate.

Certain constitutional states are contraindications to high altitudes in phthisis. Of these the most important are the rheumatic and gouty conditions, feebleness of the circulation,