cow's milk, and extol the use of pasteurized or special milk preparations. Others, again, proclaim a purely milk diet, etc.

The question of feeding our babes is a vexed one, and when we consider the differences of opinion existing among physicians, one is at a complete loss how to act.

Thousands of babes thrive upon cow's milk pure and simple: thousands, apparently, do well upon condensed milk, and many proprietary milk-foods on the market. If the children thrive, can we enter the household and say, you must not persist in this or that manner of feeding? Can we establish a law governing the mode of artificially feeding and nourishing our children? So long as each child's digestive apparatus differs, so long will we be forced to tolerate the varied articles of food.

Breast-fed children prosper. At times the mother's milk is unfitted for the babe's nutrition, then it becomes imperative upon the physician to correct the secretion by diet, mode of living, exercise, etc.

What food, or foods can substitute mothers' milk? Dr. Ratch, of Boston, has given us a good formula for artificially feeding children, viz.:

Cream		
Milk	I	**
Lime water	2	11
Sugar-water	3	"

The sugar-water is made by taking 1734 drachms of milk-sugar, and dissolving it in one pint of water.

The next problem to determine is, how are we to treat our sick infants and children medicinally? It must be remembered that I refer to diseases caused by milk fermentation, due to lactic, butyric and numerous other ferments.

Primarily, inquire into the immediate surroundings, mode of nourishment and clothing of the child. Correct the defects, if existing, in as much as lies within the province of the physician. Ascertain the number of passages from the bowels, their nature, colour and odour—examine the vomited matter. The diagnosis being made, what will be the treatment?

Withhold all forms of milk from six to twentyfour hours, or at least diminish the alimentation by milk, give freely of barley, lime or rice water. Stimulate pro re nata.

When the symptoms are those of gastro-enteritis,

with vomiting, and stools of a disagreeable odour, prescribe:

R.	Bis. subnit	5ss. to 5ii.	
	Zinci sulpho. carb	gr. ii to x.	
	Lactis, sac, q.s	ft. pulv. no x.	
Sig.	One every two hours.		

Or.

R. Salol..... gr. xii. 5ss.
Bis. subnit.... gr. xx 5ss.

M. Ft. pulv. no vi.

Sig. One every two hours.

If the vomited matter is mixed with bile, give:

- R. Hydr. chl. mite..... gr. ss. gr. iss. Salol..... gr. xx. 5i.
- M. Ft. pulv. no x.
- Sig. One every two hours.

If the passages are green,

- R. Cupri arsenitis..... gr. 1-25 gr. 1-100. Aquæ q. s. ad..... 5ii.
- M. Sig. -- 5i. every twenty minutes.

In mild forms of enteritis and colitis, and in noninflammatory diarrheas, small doses of the sulphate of magnesia and tincture of rhubarb will give very satisfactory results.

Whenever the symptoms become alarming, evacuations frequent and exhausting, and the above prescriptions fail to accomplish their purpose, don't hesitate to draw out your hypodermic syringe and inject morphine subcutaneously, with brandy.

## Obituary.

## JAMES McCANN, M.D., LL.D.

Dr. James McCann was born fifty-seven years ago in Penn township, Allegheny county, Pa. He graduated from the Medical Department of the University of Pennsylvania in 1863, and immediately entered the medical service of the army as Assistant-Surgeon of the Fifth Pennsylvania Volunteers. He continued in this service until the close of the war, when he returned to Pittsburgh and began the practice of medicine with Dr. W. C. Reiter.

He was an active and influential member of the Pittsburgh Free Dispensary from its inception, of the Board of Health for many years, of the Allegheny County Medical Society, of the State Medi-