

quiescent, preserving, however, their virulence and in condition at any time to infect other tissues. The bronchial glands were by far the most commonly affected. In no case did he find any bacilli in the mesenteric glands.

THE RELATION OF PELVIC DISEASE TO PSYCHICAL DISTURBANCE IN WOMEN.—George H. Rohé, reported to the recent meeting of the American Association of Obstetricians and Gynecologists the results of his examination and treatment of pelvic diseases among insane women in the Maryland Hospital for the Insane. Upon the supposition that mental disorders, while not necessarily dependent upon the existence of previous pelvic disease, may be aggravated by such a condition, thirty-five women were subjected to a vaginal examination, and of this number twenty-six were found to be suffering from some form of pelvic disease or abnormality. In some cases that were not examined nor suspected of having disease of the genitals, an autopsy revealed such lesions. Eighteen cases were selected for operation, and the majority of these had the appendages removed. Sixteen of these cases recovered from the operation, three of them have been discharged from the hospital apparently well both physically and mentally. In ten [considerable improvement followed the operation in both physical and mental conditions, and in three the operation was of too recent date for the expression of any conclusions. Apropos to the above report may be mentioned the fact that similar treatment has been extended to some of the inmates of the Norristown Asylum (*Med. and Sur. Rep.*), and among thirty patients examined by Dr. Maria B. Werner, the great majority had positive and easily recognisable disease of the pelvis, some cases requiring prompt operative measures. While the mental condition of some patients has not been at all improved by the cure of pelvic disease, on the other hand some insane women have been restored to their normal mental condition, and whatever may be said pro or con about this procedure, the result seems to show the truthfulness of Dr. Rohé's concluding remark, that we are required "in the name of science and humanity to give to an insane woman the same chance of relief from disease of the ovaries and uterus that a sane woman has.

FEEDING IN FEVERS.—Peabody, (*Med. Rec.*)

believes that in all kinds of illness, and especially in fevers, attention must be paid to the appetite and desire of the patients. If a patient is really hungry, solid food of a properly-selected kind, and in judicious quantities, will rarely disagree with him. He believes there is less danger in doing harm to an ulcerated ileum in typhoid fever by giving finely divided egg, beef or chop, than by giving milk. He habitually gives his patients with typhoid, who are hungry, such food. He believes it is a mistake to withhold solid food merely because a patient has fever, and that it is incorrect to regard milk as a fluid food. Milk will always remain the most serviceable general food in disease, but where it fails to nourish the patient, where it is not well borne, where it cannot be taken for any reason, it is well to remember that efficient adjuncts and substitutes are within reach.

THE TREATMENT OF DELIRIUM TREMENS.—Lancereaux (*Bulletin Medical*), maintains that the first indication in the treatment of a case of delirium tremens is to control the excitement which is dependent upon the toxic action of the alcohol upon the nervous system and is responsible for the sleeplessness, and sometimes for a fatal issue. The patient is to be isolated and, preferably, placed in a dark room, so as to be removed from all sources of irritation. Of drugs, bromine is uncertain in action, and opium and morphine are efficient only in large doses; chloral hydrate, on the other hand, is certain and prompt in action. From sixty to ninety grains are at once given, together with a little morphine. If sleep do not set in in the course of ten minutes an injection of a sixth or a third of a grain of morphine is given. If necessary the dose of chloral may be repeated after the lapse of three hours. Subsequently the interval may be prolonged. When the acute manifestations have subsided, strychnine or nux vomica is to be administered. Sodium bicarbonate may be required for the gastric condition and hydro-therapeutic measures for the general condition.

A SIMPLE PROCEDURE FOR THE DEMONSTRATION OF TUBERCLE BACILLI IN SPUTUM.—P. Kaufman (*Centralb. f. Bakterial, u. Parasitenk.*) 1892, Bd. xii., No. 4,5: The cover-glasses are prepared as usual, and stained with hot carbol-fuchsin. After this they are washed in boiling water from one to five minutes. By this washing the other