

interest, both as regards their causation and treatment.

In persistent cases of this affection in children, in which the various palliative measures of the treatment have failed, I have found that the safest and most satisfactory method is that recommended by Allingham, which consists in the application of nitric acid to the mucous membrane of the prolapsed gut. It is applied as follows:—The child's bowels are moved by the administration of a dose of castor oil, or by the use of an enema, the patient is then anæsthetized, and the surface of the prolapsed bowel carefully dried and cleansed of mucus by wiping it gently with absorbent cotton. The whole of the mucous surface of the exposed gut is next painted with nitric acid, applied by means of a camel's hair brush or a swab of cotton, care being taken not to allow the acid to come in contact to the skin adjacent to the verge of the anus. A pledget of oiled cotton or lint is now introduced into the central depression of the prolapsed mass, and by pressing it upwards with the finger the bowel is reduced. A compress of lint is then placed over the anus and held in position by bringing the buttocks together by broad strips of adhesive plaster. The bowels are kept quiet for two or three days and then opened by the administration of a small dose of castor oil. The use of the pledget of oiled lint I have not found necessary in practice, as it is apt to be passed when the patient recovers from the anæsthetic, so that I generally omit its use and merely coat the surface of the cauterized mucous membrane with olive oil or vaseline.

A recurrence of the prolapsus may take place with the first few passages, but a permanent cure is generally effected by one application of the acid; should this not be the case the cauterization may be repeated at the end of a few weeks, and even in the most aggravated cases I have never failed to see a second or third application followed by a satisfactory result.

The *palliative* treatment consists first in reducing the prolapsed bowel or mucous membrane as soon as possible, and this can generally be accomplished without difficulty by placing the child across the knees and making gentle pressure with the fingers over the whole mass of the tumor for a few minutes. In recent cases little difficulty is experienced, but in cases in

which the bowel has been down for some time and inflammatory effusion has taken place, there may be great trouble in returning the mass, and it may be necessary to administer an anæsthetic.

The *preventive* treatment should consist in not allowing the child to have the bowels moved in the sitting posture, and prolonged straining at stool should be prevented. The child should only be allowed to have an evacuation when in the recumbent posture, or while lying on the side, or in the standing position. The mother or nurse should support the perineum and anus by two fingers placed upon either side of the anus, or should forcibly draw the skin of the buttock to one side when the child is passing the stool.

If examination of the patient shows that there is present either a vesical calculus, a contracted prepuce, a rectal polypus, or parasites in the rectum, all tending to produce great straining efforts, the removal of the cause will promptly effect a cure. The importance of looking carefully after the child's diet which, as before mentioned, may be an important factor in the production of this affection, should not be overlooked.

The use of enemata of cold water or of astringent solutions, such as decoction of oak bark, or a solution of alum, may be employed with good results in mild cases, and of these I think the enemata of cold water will be found to be the most satisfactory.—*H. R. Wharton, M.D., University Med. Magazine.*

DEATH FROM ETHER.—A death under ether is reported to have occurred at Bellevue Hospital on November 5th. The operation was for abscess in the cervical region. Ten minutes after anæsthetization was begun asphyxia took place. The kidneys were found, at the autopsy, to be the seat of cystic degeneration.

TO ABORT A FELON.—Dr. Gaucher, says the *Therapeutic Analyst*, in writing on the abortive treatment of felon, states that to effect this object it is sufficient to moisten slightly the painful part with a little water, and to pass over this surface a stick of nitrate of silver. In a few hours after the skin becomes black, all pain disappears and the inflammation is arrested. No dressing is required, and the black color disappears in six days.—*Cin. Med. News.*