

where within the body may ultimately be proved to play a part in the causation of hemicrania.

TREATMENT.

Immediately upon the advent of the aura administer a saline purgative, and fifteen or twenty minutes later one should use one of the coal-tar products.

The following is a useful prescription:

R

Phenacetine grs. $2\frac{1}{2}$

Ammonol grs. $1\frac{1}{2}$

Caffeine grs. 1

Fiat Cap. No. 1.

Mitte, 12.

Sig.—Three at once and repeat in half an hour and again in four hours if necessary.

Another useful combination is:

R

Antipyrine grs. 8

Caffeinae Citratis grs. 5

Misce.

Fiat pulv. No. 1.

Sig.—One and repeat in two hours if necessary.

I usually advise a very hot hip-bath for a period of fifteen minutes, and one half-hour after the aura a large simple enema.

From the very first of the attack the patient should lie down, if possible, in a quiet, half-darkened room, alone. No food should be taken, and only sips of ice-water to quench the thirst.

A menthol pencil rubbed on the skin in the temporal region is comforting.

Upon two occasions an attack has been almost immediately controlled by injecting into the focus of the pain about 1.5 c.c. of novocaine. This simple procedure seems worthy of further trial.

Once the cephalalgia and gastric symptoms have been established the treatment is purely symptomatic.

Maintenance of the general health of the subject of hemicrania seems to avail little or nothing in preventing recurrence of attacks once the tendency has been established, but errors of