during the course of a painful malady for which the appropriate remedies are being exhibited, the chances are that the simple alleviation of pain for the time being may greatly facilitate the removal of the original cause of the malady. I have a case on hand at present in which this new feature is presented, viz., hemicrania in a woman, the result of periodic attacks of hepatic congestion, nothing appearing to influence the portal circulation so satisfactorily as cascara sagrada. This latter was taken at regular intervals during the day, whilst a single dose of two antikamnia tablets taken at bedtime produced in the mind of my patient a doubt as to which remedy was entitled to the credit. On my part I can attribute the good results already obtained to both, each having its allotted task to perform, the one hepatic, the other central, or neurotic. And so with reference to rheumatism, I am looking forward to a like happy experience. Why should the administration of iodide of potassium or salicine interfere with the action of antikamnia? At present I see no reason, but, on the contrary, shall continue to prescribe the latter as a "night cap," whilst replying upon the therapeutics of anti-rheumatic remedies."

NUTRITION IN ANÆMIAS.

Defective or unsuitable food supply is one of the most frequent causes of anæmia. It is clearly manifested that not only must we see that there is an adequate and suitable supply of food, but we must look also to its digestion and assimilation in order to obtain the benefits of the iron which it contains. The digestive secretions in these cases are apt to be defective both in quantity and quality.

The gastric mucuous membrane is atonic and enfeebled; its functions of digestion and assimilation are at low ebb, sometimes entirely abolished in other words, anæmia is but part of the condition of which malmutrition maiassimilation and faulty metabolism are the essential features. It will be seen that it is necessary in any rational treatment of these cases to awaken the dormant, torpid, nutritive functions, and restore them to physological activity. The atonic, enfeebled condition of the digestive mucuous membrane, must be remedied. The abrogated digestive and assimilative functions must be coaxed into a proper performance of their duties by something which has a direct selective influence upon them. Until this is accomplished, ordinary food, the natural restorative as well as the natural source of iron, cannot be utilized. With restored activity of the digestive and nutritive functions, the assimilation of iron and food is asured. The stimulant and restora-