

secretion or inflammatory affections, as bronchitis, pneumonia, or pleurisy, or tubercle, cancer or other growths in or near the lungs. This is a synopsis of the causes of cough. The next and most important thing is the diagnosis of cough.

To be able to cure a cough, you must search for and find the cause before you can treat a cough successfully. Cough is not a disease, but a symptom to be traced to its source. An inspection of the pharynx and larynx, and a physical examination of the chest, will generally suffice to detect the cause.

The character of the cough is often quite pathognomonic, *e.g.*, the whoop of the whooping-cough, the "bark" of hysteria, the catching, painful cough of pleurisy, the slight hack of early phthisis, and the equally distinctive cough of advanced phthisis, with laryngeal ulceration, the loud, clanging cough due to pressure on the laryngeal nerves, the spasmodic cough of asthma.

The tightness or looseness of cough, indicating the absence or presence of secretion, is a valuable guide in diagnosis and treatment. The absence of cough, however, is no proof of serious lesion, while the presence of a few granulations in the lung is often productive of incessant and uncontrollable cough; long-continued and destructive disease may exist without it.

*Treatment.*—Before prescribing for a cough, it is, of course, essential to ascertain its cause, and the simplest and most innocuous remedies should be first used. The routine treatment of cough by sedatives is as injurious as is their use in diarrheas. The secretions, which ought to be removed, are thus in either case locked up, and the irritation which would have been transient becomes established. You are called to a case of diarrhea. You feel it your duty to stop that disease, and so you give catechu, chalk and opium. The child gets worse, more fevered, and perhaps vomits; an old woman comes and, if not too late, gives castor oil and eases the child, and so it is with bronchial secretions. You give your opiates, the child becomes quiet, but somehow or other there is a glazed look in its eye, the respirations more shallow, and if some old woman does not soon come to the rescue with her emetics, Dr. — will lose another patient.

If the tonsils are found much enlarged or the uvula pendulous and irritating the epiglottis, caustics or the guillotine will remove the evil. Enlarged papillae on the back of the tongue coming in contact with the epiglottis, which may be enlarged and bent forward, can be lessened in size by caustics or other suitable treatment. If a granular state of the pharyngeal membrane dependent on torpid or engorged abdominal viscera, gout, or hepatic obstruction exists, it may be treated by the curette, local astringents, and general systemic medicines.