

be no counter-indication, she may take some broth, and on the seventh or eighth day some chicken or a mutton chop, with some wine-and-water." (4th edit., p. 234.)

Dr. Ramsbotham directs that nothing but tea, toast, or farinaceous food be given until the bowels are freely opened. A little beef-tea or broth is then allowed. To this, in a day or two, a light pudding is to be added; "and in a week she may be allowed a small quantity of solid meat." Stimulants of any kind are forbidden, under ordinary circumstances, until near the end of a fortnight. (p. 151.)

Dr. Tyler Smith says that no solid food should be given until after establishment of full secretion of milk and action of the bowels; but he at the same time adds that "cases sometimes occur in which the exhaustion is so great that animal food and stimulants are required from the first." (p. 319.)

From these quotations it is evident that the principle of practice recommended by these standard authorities is one of low diet from the first; Drs. Churchill and Ramsbotham ordering a low diet for as much as a week after labor has taken place; and Dr. Tyler Smith concurring in the principle of low diet as a rule, but admitting the exceptional necessity for deviation from this rule. The practice is, as I hope to show, wrong and unnatural. Nevertheless, the rules which I have mentioned to you are followed by a majority of practitioners. We have so grown up in the practice that it has hardly seemed to be extraordinary that a woman should be allowed little more than gruel, *ad nauseam*, for a week or more after her labor is over.

Why is it that it has been considered necessary to place a woman recently delivered on a low diet? It was thought that the adoption of a low diet was likely to be the means of preventing puerperal accidents and diseases. This is the principle on which these rules are based. Is this principle true? Are known facts in consonance therewith? I believe the principle to be entirely wrong; I am quite sure that facts do not bear it out—nay, that they distinctly contradict it. Let us consider for a moment what is the condition of a woman directly after delivery. The nervous system is much agitated; she is often much exhausted; her muscular system has been exercised powerfully and to an unwonted extent; she has lost a certain quantity, in many cases a considerable quantity, of blood. The rational treatment of a patient presenting such symptoms would be a restorative one; it would involve (first) rest, and if possible sleep; and (secondly) the administration of such nourishment as would replace what has been lost; and it is obvious that the patient will require food in proportion to amount of loss sustained. Further, it must