young infant suffering from a severe diarrhoea, I do not mean cholera infantum, but a severe infective diarrhoea. The child looks bad and cannot sleep, the bowels moving frequently, etc. A high saline irrigation is now given (say one to two quarts, according to the age of the child), immediately the pulse is of a better character, and he falls into a refreshing sleep. As a rule diarrhoea in the nursling does not make much impression on the little one; he does not lose flesh rapidly and is fairly happy. One can easily pick them out in the out-door clinic.

We come now to the poor little one who is not nursed by the mother, and who develops a severe attack of diarrhoea. This child has been fed upon cow's milk which may have been good, bad or indifferent; others have been fed upon condensed milk, or one of the numerous patent fcods. We have one broad rule in treating these little patients and it is this, stop all milk immediately. This is all very well, but we take away his staff of life, and with what do we replace it? What do we give him to make up for his thirty to forty ounces of good food? The answer is, practically nothing. We deprive him of his means of support and wonder why he does not thrive. We offer him barley water, egg albumen, rice water, arrowroot, etc. Barley water is practically nothing but water with a small amount of starch (F. Still), rice water is not much better, and albumen water is practically water. Now, as far as these are concerned, we might as well give plain boiled water, and it is more palatable. We must try to make up for the loss, and the only way to do this is to give the child some form of nourishing liquid diet. What is the cause of death in these children? Most death certificates read: "heart failure, exhaustion, etc.," but a better term would be "starvation."

When half of the fluid contents of the blood are lost from the vessels the heart has nothing to do, and gives up work. Another cause of death in these children is sinus thrombosis, due to concentration of the blood. F. Still found it only once in eighty-two autopsies in Great Ormond St. Children's Hospital.

A not infrequent cause of death in children who suffer from toxic diarrhea is hyperpyrexia. The movements may be only three to five in the twenty-four hours, but death takes place rapidly. I have met with two such cases during the past few days; one developed a temperature of 107°, with nystagmus and cold extremities. The other had a temperature of 106.8°; both were rapidly fatal. In a case of this kind the little one's stomach should be washed out at once, a high rectal saline should be given, a dose of oil should be given by the mouth, strychnine should be given hypodermically, and a small amount of sterilized