been that it aggravates, if it does not actually induce diarhœa.

And on the use of stimulants he remarks as follows: "In many cases of fever it will be necessary to give stimulants. You must not give stimulants *simply because the patient has fever. Many patients with fever do better without them.* But you must not refrain from giving stimulants when the heart shows signs of weakness, as happens in the advanced stage of most protracted fevers," and recommends first *ammonia*, next *ether*, and lastly. (or as if a *dernier resort*) alcohol,—"in quantities proportionate to the weakness of the heart and pulse," also cautioning against errors as follows: "You must take care that the remedial measures which you adopt in no way thwart the natural mode of recovery or favor the natural mode of death, which a too free use of alcoholic stimulants invariably does.

M. L'Ambert, in a recent article advocates the use of cold ablutions in fever, either in the form of cold water baths, or by the use of a cold wet sheet, as an anti-febrile, sedative, and soothing agent. He claims for them that they naturally lower the temperature, reduce the pulse from 8 to 30 beats, allay cerebral and nervous excitement, stimulate the secretory organs, and, in the exanthems, favor the appearance of the eruption.

Dr. Murchison also considers that cold and tepid sponging or cold affusions are remedies deserving further trial for reducing the frequency of the pulse and lowering the temperature in fever.

Coming back to hospital statistics: we have statistics of the London Hospital, extending over a series of years, which show a gradual advance in the rate of mortality in accordance with the gradual advance in the quantity of alcohol prescribed. From 1862 to 1864, the deaths rose from 7 to 10 per cent. In the surgical department, from 1854 to 1864, from 4.48 to 6.55, an increase in ten years of nearly one-third.

Statistics as published by Dr. Fraser regarding the employment of stimulants and the mortality in the London Hospital during the few years preceding 1865.

"In 1851, there were 4,051 in-patients in the London Hospital; that in 1857, there were 3,935 in-patients, and the mortality was greater in 1857 as 8 to 6·5 per cent., although £962 more were spent in 1857 than in 1851 for articles of luxury.

The summaries of these statistics stand thus:—

From 1854 to 1858, each *Physician* employed 12,803 ounces of wine annually; the deaths being 11·88 per cent. From 1860 to 1864, he employed 48,136 ounces; the deaths being 12·65 per cent.

During 1854 to 1858, each *Surgeon* employed annually 38,016 ounces of wine; the deaths being 4·48 per cent. During 1860 to 1864, he employed annually 142,951 ounces; the deaths being 6·65 per cent.

In 1862, the general mortality of the hospital was 7·4 per cent.; the consumption of stimulants being 1,281 gallons of wine, 162 brandy, 38 gin.

In 1864 the mortality was 10·5 per cent.; the quantity of stimulants consumed being 1,558 gallons of wine, 359, of brandy, and 62 of gin.

Dr. Fraser remarks the steady rise in the mortality rate coincident with a steady increase of the use of alcoholic stimulants, and goes on to make the following pertinent observations:

"Well knowing the fallacies so often edited through an erroneous interpretation of statistics, we do not pretend to connect the increase of deaths with the increase of stimulants consumed. But, when we reflect upon our modern advancement in medicine and surgery (especially as miscalled 'Conservative')—when we think of our great modern hygienic efforts,—*we may fairly ask for some explanation of the fact of a general advance in the mortality of a London Hospital.*"—Dr. Fraser, in *British Medical Journal*, Dec. 9th, 1865.

On the other hand, the treatment of particular diseases without spirits, or with vastly reduced quantities, has been, without exception, followed by a largely lessened mortality. This has been true in the case of cholera, rheumatic fever, typhus and typhoid fevers. Vol. II, third series of Guy's Hospital reports, contains a report of thirty-six cases of rheumatic fever, treated for the most part with simple diet and mint water, by Sir W. Gull, M.D., and H. Sutton, M.D.

On the reading of a paper, in 1862, before the London Medical and Chirurgical Society, by Dr. Dickenson, on the treatment of acute rheumatism, considered with regard to the liability to affections of the heart under different remedies, Dr. (now) Sir W. Gull, observed that in his hands the alkaline treatment had proved a failure. "He had used colchicum, Dover's powder, nitrate of potash, opium, &c., without satisfactory results, and was therefore content to keep the patient quietly in bed, so as to avoid disturbing causes, and to support him on the simplest diet, giving him a mixture to please and satisfy him, and lead him to believe that something was being done, and he usually gave them a little extract of Taraxacum mixed with peppermint water. Amongst 64 cases so treated he had scarcely had a case of heart disease." Dr. Wilks and Dr. Rees, of Guy's Hospital, have also treated rheumatic fever exclusively without drugs and stimulants, and instead of the common frightful sequel of heart disease it has been cured in half the usual time, and with less than one per cent. of that malady. Hence if the frightful sequel, heart disease, is favored by alcoholic stimulants then surely this is another of those disorders (one of retained effete matters in the blood), in which alcol-