

which substances the system is already surcharged in rheumatism. All this also applies to valvular inflammation from scarlet fever, etc. Coming to the condition of inflammation, rest is the first requisite to successful treatment. But many physicians who prescribe rest in bed, impose work by food and medicine. Everything which raises the blood pressure imposes more work on the valves. They flap together with greater force, and we know that in this way even hard exercises may excite inflammation along their line of contact. Increased blood pressure will send more blood through the coronary arteries and into the inflamed area, the very thing we wish to avoid.

Hence the rule, never give any food or drug in inflammation of the heart that is known to raise blood pressure. The concomitants of urea are heart known to raise the blood pressure as evidenced by the hard pulse of uræmic patients. Now there can be but little difference between retaining these in the blood by kidney default, and pouring them into the mouth by medical default. The same applies to meats. It is most important to remember this also in all cases of cerebral hæmorrhage in progress or threatened. The food in inflammation of the heart should be milk and the carbo-hydrates.

As to medicine I have only time (for this paper is already too long) to warn against the too common exhibition of digitalis. True it prolongs the diastole and thus rests the heart, but this good is counter-balanced by the high arterial pressure which it induces and the consequent straining of valves already weakened by inflammation. We must select our remedies from the list of cardiac depressants. Among these I give priority to aconite, veratrum viride and chloral. In practice I use aconite in doses of one to three drops every four hours combined with ten to twenty grains of citrate or acetate of potash, with continuous counterirritation and poultices to the præcordium. Veratrum viride I have not used, but reasoning from its unparallelled power of lowering blood pressure and reducing the pulse rate, it ought to be even better than aconite, were it not for its tendency to produce vomiting especially in children. But in adults this could be easily watched, and the doses reduced on the supervention of the least signs of nausea. It should be given in doses of one or two drops every hour as recommended by Hare, and not in the doses of five to ten or fifteen drops given in the B. P. Chloral fills these indications. It lessens the fibrinity of the blood (Barthlow) though Wood throws doubt on this. It reduces blood