

FAITH HEALING.—Christian Science (*sic*) not being quite a dead letter among us, the following, *Lancet* will be read with interest.

An inquest was recently held upon the body of a girl aged seventeen, who died in Brixton of acute tuberculosis and peritonitis from a perforating gastric ulcer, having been very ill since last Easter. She had no medical advice because, according to the evidence of the woman in whose house she had stayed, "she had trusted in the Lord to heal her without medical aid." It is useless to point out to people of this cast of mind the falsity of their theological reasoning, but we do think that the legislature, which takes care to prevent people jumping off the Monument or going on to ice too thin to bear their weight, might step in and prevent peculiar people and faith-healers from murdering their children by neglect. We should be the last to deny the power of faith, but, as a recognized authority says, "faith without works is dead," and it is a canon of theology that the Almighty works by means, and those means humanity is bound to use. The *New Science Review* for July contains an article entitled "Has Mental Healing any Scientific Basis?" We do not quite understand this question, but we gather from the article that help need not always come from without, but there is a broad field for "auto-suggestion and systematic concentration with happy results." The ways and means to become properly auto-suggestive is as follows: You say mentally to yourself—even mechanically at first—until the habit is formed, "I [the real ego] am well. I am strong. I am pure. I am perfect. I am one with the Divine Spirit of Wholeness." The next step is, "To ensure progress special times and seasons should be set apart for focalized thought and affirmation. . . . At times when the objective world, with all its cares and anxieties, may conveniently be barred out, the full glare of the consciousness is turned upon the divine ideal within, which thereby gradually becomes graphic and ruling." It is evidently quite easy to become a mental healer, but we seem to remember that this process is not new. There was once a sect in the Eastern Church called the ——— who by steadily gazing at their navels were at length rewarded with a sight of the light (created or uncreated) which shone at the Transfiguration. This method, we suppose, is what Mr. Henry Wood, the writer of

the article in question, calls "keeping company with his inner ideal." However, he does not seem to have much faith in the process he recommends, for he concludes: "As related to illnesses, prevention is the end to be sought, so that in time cures may be unnecessary." If any one by "keeping company with his inner ideal" can cure a gastric ulcer he would be a most valuable addition to our present therapeutic agents.

THIRST AFTER CELIOTOMY.—This distressing symptom which is so troublesome after operation on the abdomen *should* be overcome by the method of Dr. Wm. Hamistan gives in the *Am. Jour. of Obstetrics*.

The patient should have the usual preparation for celiotomy—*i.e.*, diet, daily baths, cathartics, etc. For three days prior to operation, order the patient to drink one pint of hot water an hour before each meal and on retiring, thus drinking two quarts of water each twenty-four hours, the last pint to be taken three hours before the time set for operating. Do not omit to give the water the day previous to the operation, while the patient is restricted to a limited amount of liquid nourishment and the bowels are being unloaded. We thus restore to the system the large loss of fluid occasioned by the free catharsis, and we have the great satisfaction of seeing our patient pass through the trying ordeal of the first thirty-six hours after operation in comparative comfort, with no thirst, a moist tongue and active renal function, represented by an excretion of from twenty-eight to fifty fluid ounces of urine during the first twenty-four hours, cathetrization being seldom necessary. This is in keeping with the full character of the pulse noted.

The above detail I have recently carried out in twelve cases. To eleven chloroform was administered, to one ether. The time required to complete operation varied from ten to fifty-five minutes. Whether the case was one of sclerotic ovaries or a pus case with universal adhesions of all the pelvic structures, the result has been uniform and highly satisfactory, thirst being allayed and excretion stimulated (a very essential condition to prompt recovery).

I believe this method will prove to be efficient in the hands of abdominal surgeons generally, and I publish it early with all confidence that the