slings should *always* be placed *next* the breast. The clumsy practice of putting them on *over* the night-dress is as reprehensible as binding over the chemise, as used to be, and in many quarters still is, the practice. You must put a woollen shawl or handkerchief over the patient's shoulders whilst you are fixing the slings, to avoid chilling. She must, of course, sit up in bed to have them done.

We will begin with the right breast, and I trust do it *right*. Roll up one of the slings to within three or four inches of its length, place it on the left shoulder, and hold it there with your right hand. With your left hand pass the sling over the back, under the arm, and below the breast, well holding it up, and bring it back to the left shoulder where you started from; fasten both ends firmly together with a binding pin temporarily. Having positioned your sling, and both hands being free, you have to fit it to the breast, and in the case we are considering, to pack it with the wadding, which must be put all over it above and below. You may have to tighten the sling again after this; it is most important to have the breast as high as possible, consistently with the comfort of the patient.

You now fit the sling to the padded breast, and make a sort of cradle for it. To do this you will have to pin it here and there in little plaits, and I use very small safety pins for this purpose, it is more convenient than sewing, and ordinary pins are neither safe nor suitable for the purpose. Having thus slung, padded and fitted the right breast, you repeat the manipulations I have described on the left; you then replace the night-dress. Before fastening up the front you must pass in one of your hands up to either shoulder, put your fingers *under* the ends of the sling, and with your other hand run a safety pin, or better still, one of the modern double-pronged metallic capped surgical pins; fasten the sling to the shoulder of the night-dress, and then take out the temporary pin, which, not being guarded, is not safe to be left in. This plan prevents the slings from slipping off the shoulders. Replace the bed jacket.

The breasts should be left thus supported and packed for at least twenty-four hours. Quiescence is an important point here, and we want to avoid chilling as much as possible. We may have to have recourse to fomentations or some other form for the application of heat and moisture; but, in a great majority of the cases we have been considering, they are not required.

I have brought before your notice the management of a case in which the milk-flow has to be repressed and the patient a primapara. Bear in mind, in these cases, that, when once repressive measures are begun, they must be steadfastly continued during early convalescence; the tide cannot be stemmed all at once, and the blood supply to the breast, like the tide, ebbs and flows.

In my next paper we will take the case of a primapara who intends to suckle, and we shall see a great difference in the treatment required to meet it. (*To be continued.*)

PRACTICAL LESSONS IN ELECTRO-THERAPEUTICS.

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(*Continued from page 197.*)

STRIKING evidence of the presence of induced currents may be noted by means of a simple experiment (see Fig. 26). As before,

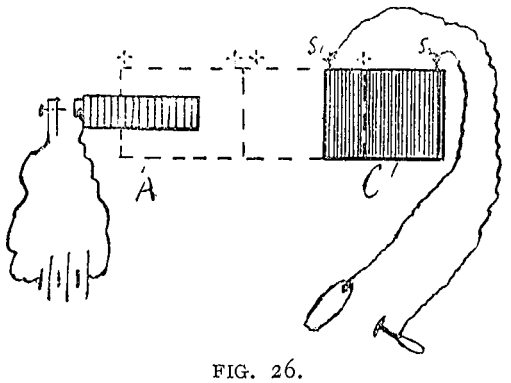

FIG. 26.

A is the primary coil, C the secondary. Attach two electrodes to terminals S_1 S_2, and let them be connected to some sensitive parts of the body—say the two hands (well moistened). Then start the coil with C in the position shown—*i.e.*, more than its own length away from A. Alternating currents will be distinctly felt by the subject holding the electrodes, and as C is in no way connected with any electric generator, it is manifest that whatever current comes from it can only be the result of induction. If, while everything else remains the same, C be steadily moved towards and over A, as shown by the dotted lines, the induced currents steadily increase as the distance between the two diminishes.

The test may be made still more delicate by substituting a telephone for the electrodes. Extremely small alternating currents make a distinct humming noise in a telephone, and it will be found in this case that even when the secondary coil is some feet away from the primary a noise is heard in the telephone, thus showing the presence of induced currents.

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