forms a good dressing, or better still, equal parts of linseed oil and lime water, shaken together, should be applied freely on lint, and renewed frequently. This application will relieve the smarting pain very speedily. Never hold a burn in front of the fire, as it will only add to the pain and suffering. If a blister rises, do not break it but place a dressing of carbolic oil (1 in 20) on cotton wool over the part. This or some simple dressing such as spermaceti, or boracic ointment may be used until the skin heals.

In case of clothes becoming ignited, which sometimes happens to a woman's dress, do not rush about, if there is no one at hand to assist, but call for help, and lie down at once on the floor and roll over, wrapping a mat or rug round, if possible, to smother the flames. Help may best be rendered by a bystander, extinguishing the flames with his coat, if a rug or blanket is not at hand. To treat the resulting burns no better first aid can be given than described above, except by carefully covering the injured parts with sheets of cotton wool until medical assistance is obtained.

Burns caused by the action of some strong mineral acid should be treated with a solution of common washing soda in water, at once, the solution being freely applied to the part on lint. When a burn is caused by carbolic acid, sweet oil should be poured over the part, and soft rags, saturated with the oil, placed over it.

Bleeding of the Nose.—Bleeding of the nose sometimes acts as a relief to the head, but when persistent, efforts should be made to check it, and if it occurs often, proper advice should be obtained. In obstinate cases it may usually be stopped by cold water cloths applied to the nose, or cold applications to the back of the neck. The patient should sit upright, with the head held well back. Powdered tannin snuffed up the nostrils is often successful.

CHAPTER III.

FRACTURES, DISLOCATIONS, SPRAINS.

Fractures.—Fractures or broken bones may be roughly divided into two classes. A simple fracture is when the bone is broken only, and there is no wound. A compound fracture is when both occur, and there is a wound from the skin that leads to the broken bone. A fracture may be caused by a fall, or a sharp blow, etc. In all cases of broken or dislocated bones, skilled surgical treatment and medical aid is necessary, and must be obtained with as little delay as possible. All we can observe

here, is to simply point out the best thing to do, and how to render first aid in such cases until the doctor arrives. In every instance, it is important above all, to remember, never to attempt to move the injured person from the spot, until the broken part is secured by something firm, which will prevent the fractured bone moving, and perhaps doing serious harm, as well as causing much torture to the patient.

Indications of a Fracture.—A broken bone may be detected by passing the hand very carefully and gently over the part, when an irregularity will be felt. There is great pain, and inability to move the limb. If compared with the sound limb some distortion will be observed, and in gently moving it a grating sensation will be felt.

The Best Thing to Do.—If the fracture has happened to the skull, causing bleeding from the mouth, ears and nose, place the patient on a sofa or bed, the head being slightly raised, and keep him still and quiet until medical aid is procured, but never give brandy or other stimulants.

Fracture of the Arm Bone.—A broken arm-bone is indicated by the injured person being unable to move the arm, and there is also deformity. Bend the elbow and place a splint on either side of the injured limb, one in front and one behind, supporting the arm in a sling, and obtain Medical assistance as speedily as possible. When the fore-arm is broken bend the elbow as in the former case, keep the thumb upwards, then apply a splint over the front, and one behind, placing the arm in a sling.

Pieces of stiff cardboard, such as the lids of boxes if long enough, padded inside, or the straw covers of wine bottles, may be used as temporary splints if nothing else is handy. These can be secured to the limb with two handkerchiefs. In case of fracture of the thigh, a long splint should be placed on the outside of the body, extending from the armpit to the foot, and secured by bandages. A straight pole, broomstick, billiard cue, two umbrellas tied together, or any long, straight piece of wood will answer the purpose of a temporary splint.

Fracture of the Leg.—Apply a splint on the outside and another on the inside, securing them firmly round the leg, then tie both legs together before the patient is moved.

When the fingers are broken place the whole hand on a broad splint, well padded, securing it there with a handkerchief, and then place the arm in a sling. In case of fracture of the jaw, gently raise it to its natural place, securing it by a triangular bandage passed under the chin, and over the head.

(To to continued.)

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