Medical Matters.

THE NERVES AS AFFECTED BY DIET.

The *Medical Brief* says :—We eat to make us strong, but to accomplish this, we must eat the right kind of food in just sufficient quantities to satisfy the actual needs of the body. Strength, or energy is measured and apportioned by the nervous system. Unless the nerve centres are in health, they cannot do this. The digestion and storing up of surplus nutriment is a tremendous drain upon the nervous system, keeping it so weak and toneless, it is unable to appropriate the needed nourishment to make good its own losses. The nervous system of a glutton is like the overworked mother of a large family. It is so exhausted by the incessant demands of the digestive organs, it has no time to attend to its own needs. The nervous system controls the secretions of digestive juices, the peristaltic movement of the stomach and bowels, the activity of the intestinal absorbents, the phenomena of assimilation and excretion. The secretory glands, the muscular coats of the digestive organs, the vessels which carry the product of digestion into the circulatory system, all use up nervous energy, so that the plump, sleek person, whom we speak of as well nourished, may have no strength at all. He has a big, unwieldy, shapeless frame, over which he has little control and of which he can make little use. His nervous force is entirely consumed in digesting food, storing up fat, and carrying the load around. It takes all his energy to live without trying to do anything. Appetite and digestion have been cultivated in his stock at the expense of other faculties and activities, perhaps for generations. The circulation of these persons increases in *area*. New veins, lymphatics and arterial twiglets are thrown out to keep alive the unnecessary bulk of stored-up fat. This increases the work of the heart, which is proportionately enfeebled, and the muscles are flabby from the presence of fluid in excess. After this condition of affairs is firmly established through the cultivation of the digestive apparatus at the expense of the nervous system, it is a difficult matter to get back the hardihood and stamina, the normal outline of figure, the firm organization of all the parts, the tense muscle and mental acuteness, enjoyed by the man who has always been frugal in his diet. It is true there are people who eat ravenously, and yet remain thin and feeble. Their case is even worse. The balance of nutrition is entirely destroyed. Assimilation scarcely takes place at all. Irritation and disorganization of the nerve centres has taken the place of simple weakness. They are tearing down the body substance, and death as a result is only a question of time. If the effect of diet on the nervous system were better understood, we should not see people habitually, sometimes conscientiously, stuffing themselves with unnecessary food, which it will require all the little energy they have left to imperfectly digest, in order to "make themselves stronger."

EMPYEMA SURGICALLY TREATED.

Treatment.—To summarise the treatment of empyema, the *Therapeutic Gazette* says the following propositions seem tenable :

1. Empyema is best prevented by promptly evacuating all considerable inflammatory effusions.

2. In the diagnosis of these effusions, by means of exploratory aspiration, the skin should be punctured by a tenotome at the point where the needle is to be driven in.

3. Serous effusions are best evacuated by aspiration. If they re-accumulate after the third evacuation, they should be subjected to continuous siphon-drainage, the puncture being made by a small trocar and cannula, the latter being of such size that a small drainage-tube may be slipped through it.

4. Recent empyemata are best treated by continuous siphon-drainage, the tube being introduced through a cannula of at least the diameter of the little finger.

5. When, because of a narrow intercostal space, or because of constant blocking with fibrinous material, siphon-drainage thus provided is inadequate, an inch of one of the ribs (usually seventh or eighth) should be resected, and a drainage tube the diameter of the thumb should be used.

6. When the conditions are such that it is obviously impossible for the lung to expand under the influence of siphon-drainage and respiratory exercises, Delorme's operation of stripping the pseudo-membrane from the compressed lung should be attempted.

7. When Delorme's operation is impracticable, a resection of the ribs or of the chest-wall and thickened pleura, corresponding in extent to the size of the underlying cavity, is indicated.

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