appears to be necessary.

With some authorities, and particularly American physicians, an opinion seems to be growing that the inhalation of hot air has an enervating effect on the child, and this is no doubt the case. It is, however, very difficult to arrange that the infant shall have a supply of pure air at a lower temperature than that of his crib or incubator.

The maintenance of this high temperature adds much to the difficulty of nursing these cases. Where the nurse has to work in a highly-heated room, she must take care to dress suitably, else her work will suffer. It is clear also that her hours of work must be comparatively short.

Points in the Nursing of Premature Infants.

1. Constant supervision.
2. Avoidance of handling as far as possible.
3. Absolute rest, including the exclusion of all sounds, and the avoidance of bright light.

The Feeding of the Premature.

Equal in importance to the maintenance of a proper environment comes the difficult matter of feeding.

The limited capacity of the premature infant's stomach and the imperfect development of its powers of digestion, absorption, and assimilation make this a problem of extreme delicacy.

What is possible?

1. Usually the mother is quite unable to nourish the child.

2. In France a foster-mother is often employed, but even where attainable it is generally necessary for the continuance of her nursing powers that she should also suckle her own infant as well, for it will be readily understood that the excitation furnished by the premature child is often not sufficient to maintain the supply of milk.

If the milk of the foster-mother has to be artificially withdrawn, as is indeed often necessary in these cases, the secretion of milk will generally quickly cease, unless maintained by the proper stimulus of suckling by a sufficiently vigorous infant.

Substitute Feeding for the Premature.

Generally we have to fall back upon some form of modification of cow's milk. Such as we employ in this hospital prescribed according to the percentage system, undoubtedly furnishes the best results.

The chief points to bear in mind are these:—

1. Begin with very weak modifications.
2. Increase the proportions very gradually.

Specimen Prescriptions.

The following mixtures taken from the work of my colleague, Dr. Ralph Vincent, indicate sufficiently the general characters of the food required for these premature cases:—

	Per cent.	Per cent.	Per cent.
Fat	1.00	1.00	1.25
Lactose	3.50	4.00	4.50
Whey proteids .	0.25	0.50	0.50
Caseinogen ...	0.10	0.10	0.25
Limewater ...	5.00	5.00	5.00
	24 feeds each of 1 dr.	24 feeds each of 1 dr.	24 feeds each of 1 dr.

Method of Feeding.

Generally the premature infant is too feeble to suck. It must at least to begin with be fed by hand.

This can be accomplished—

i. By means of a spoon.

ii. With the aid of a medicine-glass.

iii. By means of a dropper. This should always be adopted in preference to the two former methods. The best form is that usually known as Breck's. It consists of a graduated pipette furnished at one end with a rubber squeezer, and at the other with a small perforated rubber nipple.

In some cases gavage has been advocated, but it is a method to be avoided if possible.

The use of warm oxygen may be of service in dealing with the cyanosis, which is often a danger signal in these premature babies calling for immediate action.

From this necessarily condensed account of the characteristics of the premature infant and the very considerable difficulties entailed in the proper management of such cases you will see that the task is one of much toil and trouble, for the conduct of which scrupulous care, tireless industry, and endless patience are essential.

THE FIRST THERMOMETER.

According to the Abbé Nollett, the first thermometer was invented by a peasant named Drebbel, of North Holland. Drebbel's thermometer was composed of a vertical glass tube, ending at the top in a bulb while the lower end was plunged in a vessel filled with water or some coloured fluid. When the bulb warmed the expanded air within it drove back the water. When the air cooled again the external pressure caused the liquid to rise again in the tube. The members of the Accademia del Cimento soon substituted for this the more convenient instrument we still use.

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