

long last the cause was found. Promptly came the question: "Can it be cured?" "Yes, if you follow my directions."

Gladly enough we were willing to do anything to give the child the best possible chance of health, as well as to rid ourselves of a constant anxiety.

The orders were as follows:—Breakfast in bed, to consist of porridge and flutes, which is bread baked in long thin rods, and very crisp. Dinner at 10.30: a piece of grilled meat with a small piece of fresh butter on it; macaroni milk pudding, with stewed whortleberries. At 3.30 a cup of oatmeal cocoa made with milk.

At 6.30 supper, the same as dinner, but without meat. No fluid with meals, but all that was needed between them. A dose of castor oil mixture was ordered to be given once a fortnight in hot tisane—*i.e.*, lime flower or camomile tea. With what pleasure we devoted ourselves to preparing this wonderful diet.

At first the child enjoyed the change of food, although in a short time the monotony palled, but in a few weeks, as she began to improve in health, a better appetite appeared, and the sameness was forgotten.

At the end of two months we paid our second visit to the doctor. He was much pleased with the improvement, but ordered the treatment to be continued for another two months.

At the end of that time the castor oil mixture was stopped and powders substituted, one to be given in a wineglass of Vichy three times a day half an hour before meals, and a half tablet of clorogen with the dinner for ten days in each month; also some slight additions to the diet, change of fruit, a little cheese added to the macaroni, &c., but each addition was to be made very gradually.

As the months wore on, many other things were added. The child's appearance improved wonderfully; the sickness had totally disappeared after the first week of treatment; the appetite was uniformly good, and the additions to the diet produced no ill effect, so very gradually the hours were altered to fit in with the ordinary meals of the house, this change taking place at the end of 15 months' treatment.

The child is now ten and a half years, a happy, healthy, normal schoolgirl, growing very rapidly, and as full of spirits as a child should be.

The liver is quite normal. Of course, a certain amount of care must be exercised in regard to diet still, but only such care as anyone with a liverish tendency must take.

I have so often thought since why did none of the other doctors think of examining the child's abdomen? And, incidentally, I have never ceased to be grateful that through such simple means the lives of our small family have been relieved of so much worry, and the child has been set upon the high road of health and happiness.

MARY BURR.

#### ANTISEPTICS AND GUNSHOT WOUNDS.

The possibility of treating newly made wounds with some application which shall prevent the development of sepsis, until such time as they can receive skilled attention, is a problem of the greatest importance at the present time, and the Hunterian Oration delivered by Sir W. Watson Cheyne at the Royal College of Surgeons recently, in which he described experiments which, in conjunction with Fleet Surgeon Bassett-Smith and Mr. Arthur Edmonds, he is making in the disinfection of wounds, especially gunshot wounds, is of exceptional interest.

The problem which these investigators have set before themselves is whether it is possible to introduce an antiseptic into a wound soon after its infliction, which will remain there and inhibit the growth of bacteria until such time as the wound can be disinfected thoroughly. The essential point is that the antiseptic shall remain in the wound and not escape at once. Fluid cannot, therefore, be used, and paste was selected for these experiments. Investigation has proved that there are several antiseptics of value from the diffusion point of view which may be worth a trial in connection with wounds in war. The whole subject must, Sir W. Watson Cheyne says, be thoroughly worked out at the front, but he was able to give definite instances in which an antiseptic paste had been applied to wounds, and in which, in one instance, there was no infection and no suppuration for four days, and, in another instance, for ten days.

#### A RECORD OF ENTERIC CASES.

It has been decided that the military sanitary officers shall keep a record of each case of enteric fever occurring in this country (1) to ensure that each case is made the subject of inquiry; (2) to provide material for further inquiry where multiple cases occur; (3) to compare the experience of various military units; and (4) to enable a summary to be prepared of the experience of the Army as a whole and in different parts of it.

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