machine carries the entire weight of the body, and even on level ground the movement of the pedals only brings into action the muscles on the front of the thigh and the back of the leg, while every time the pedal revolves a space of from twelve to seventeen feet is covered. Quite recently, a still further advantage of the cycle has been pointed out, as a means of removing deformity and curing disease. An American surgeon has stated that patients suffering from swollen and painful knee and ankle joints, due to rheumatic thickening, have been cured of their complaint by cycling; and such a method must certainly be more agreeable than those usually employed. The one caution which is necessary to all cyclists, and especially to those in, and after, middle life, is that the utmost care should be taken to avoid over-exertion. The strain which is caused upon the heart and blood vessels by attempting to ride up-hill is sometimes not realised until the feat is accomplished. But, in many instances, overstrain undoubtedly results in the occurence either of acute dilatation of the heart, with perhaps even fatal weakening of the organ, or the formation of an aneurism at the bend of the aorta; and amongst women the same muscular over-exertion not unfrequently causes the occurrence of hernia.

PICRIC ACID.

Some months ago, we called attention to the excellent results obtained in the treatment of burns by a solution of picric acid. It was shown that an immediate application of lint soaked in this fluid had the most marked effect in promoting the rapid healing of very severe burns, and, since then, those results have frequently been confirmed. A French physician has recently suggested the use of this drug in the treatment of acute eczema and other skin diseases. A piece of lint soaked in a one per cent solution of picric acid is applied to the affected surface and secured by a bandage; as a rule it is left in position for about two days, at the end of which time, in nearly every instance, the inflammatory condition has been found to be much improved, that is to say, the swelling redness, and heat of the surface has been more or less entirely reduced, and the characteristic secretion has often entirely disappeared. The application is renewed every second day. It would appear, however, that the method is chiefly applicable to acute cases, and does not yield such good results in those of a more chronic character,

Practical Diet=Kitchen Work as a part of the Training School Curriculum.*

By MISS STOWE.

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WE all realise how little most of our trained nurses know of the art of preparing suitable nourishment for the patients under their care. That they can guide them through a serious illness is well understood, but when the stage of convalescence approaches, they are often puzzled to know how to sustain the life that, with their skill and knowledge of nursing, they have helped to save.

Formerly, most girls were taught at home how to prepare the more common dishes, and some few dainties; but now the knowledge is mainly derived from cooking schools.

No one will deny that it is a very important part of the treatment of most cases of illness, to have the food properly cooked and properly served.

Diet is being recognised as a very important subject in the curriculum of a medical school, and more attention is being paid by the physician in the selection, preparation, and manner of serving food. Hence the necessity for practical instruction in invalid cookery in our training schools.

Seventy papers, containing a list of seventeen questions, were sent to the different members of our Association. Fifty-eight replies were received; of these, twenty-three stated that they had practical diet-kitchens in good working order. Nineteen stated that their pupil nurses were sent either to a cooking school for instruction, or were taught by a competent teacher at the hospital or at their nurses' home. Sixteen schools, regretted that they gave no instruction whatever in cookery. Fortytwo schools, out of the seventy written to, stated that invalid cookery was a part of their curriculum.

The methods of teaching are various. In twentythree schools the nurses are taught in the dietkitchen; in others, by classes in practical work; in others, by lectures—the lecturer doing most of the practical work; in others, the methods are combined.

That nearly all superintendents are interested in this important branch of our work, is shown by the kind letters received from them, and their expressed wish that a diet-kitchen, with a competent teacher, might become a possibility in their particular schools. Several stated that they expected to have a diet-kitchen soon. Others, that they were prevented from having one, by the lack of appreciation by the Board of Managers, of the necessity; and others, by the unavoidable expense necessary for fitting out such a kitchen.

The class instructor receives from fifty cents to three dollars a lesson for each pupil—the price . varying with the school, and with the training

* Read before the American Society of Superintendents of Training Schools for Nurses, Toronto, Canada, February, 1898.



