

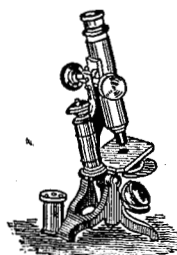
when swelling of the mucous membrane of the bronchus, and, perhaps, a plug of mucus prevents the entry of air into a part of the lung. This is greatly assisted by weakness of the chest walls, as occurs in rickets. If at all extensive it is a dangerous condition, showing much weakness, and causing urgent dyspnoea and blueness of the lips and extremities. (3) Catarrhal pneumonia may also complicate bronchitis. It is a most dangerous disease, and will be described later. When a child subject to bronchitis gets a cold in the head it should be confined to a well ventilated but warm room, or suite of rooms, as long as the symptoms continue. If there be much irritating cough a little black current jelly, or glycerine lozenges, will give relief. The clothing should be carefully supervised, woollen undergarments being most needful. As there is no doubt these colds are infectious other children should be kept away from the patient as much as possible. If the catarrh pass downwards to the bronchial tubes, the child should be confined to bed and in a severe case a tent over the bed may be useful, the air of which may be warmed and moistened by a bronchitis kettle. The food should consist of milk and barley water, and beef-tea if desired. Poultices to the chest may be useful, and the addition of a tablespoonful of mustard to four or five times that amount of linseed meal makes them stimulating as well. For very young children spongiopiline wrung out in hot water is preferable to a poultice, as it is much lighter and less suffocating; there is nothing more distressing for an infant than to be enveloped in a large heavy jacket poultice. Poultices are most useful in the early stage when the cough is irritating and the secretion of the bronchi scanty. In some cases an emetic may be ordered by the doctor and is of much value, the patient may bring up mucus from the chest and afterwards the dyspnoea will be much relieved. Cyanosis is a sign of danger, and in some of these cases two or three leeches over the heart may relieve the symptoms considerably. Alcohol may be necessary but must, of course, never be given without express orders from the doctor, as in large doses it is narcotic, and so prevents the relief of the lungs by coughing. The same remarks apply to opium; in bronchitis in a young child even a small dose may be fatal, and as most of the patent cough mixtures contain this or some other sedative they are most dangerous. The

digestive organs suffer in bronchitis partly, no doubt, from swallowing of the bronchial secretion, and the bowels should be occasionally cleared out by rhubarb and soda, castor oil, &c., while the diet must be light and digestible. When the bronchitis is improving, liniments rubbed into the chest may do some good, such as the turpentine liniment, or the liniment of iodide of potassium and soap of the British Pharmacopoeia.

(To be continued.)

Medical Matters.

PRESENT STATUS OF HYDROPHOBIA.



THE *Journal American Medical Association* says:—Modern scientific medicine is under heavy obligation to Louis Pasteur, not only for many original and illuminating observations, but also for the healthful impetus he gave to careful, painstaking investigation; and in this material age, not the least tribute that can be paid his work is the acknowledgment of its intensely practical value. His studies in fermentation and in parasitology opened new avenues of thought and activity, and have led to results far exceeding the most sanguine expectations of his time. His method of treating hydrophobia was long regarded with doubt and suspicion, but the lapse of time has only tended to place it on a firmer basis, and secure for it the recognition it deserves. It was, in some respects, next to vaccination for small-pox, the first of the biologic methods of treatment. The evolution of our knowledge concerning hydrophobia is traced in a most interesting manner by Babes in a recent communication. As he points out, it is really only within the last twenty-five years that correct notions on this subject have prevailed, and it is now generally agreed that hydrophobia, or rabies, is a specific infectious disease transmitted between animals and man, although the hypothetical micro-organism has not yet been isolated. The medium of communication is usually the saliva of a rabid animal, either through a bite-wound or other solution in continuity of structure, and the central nervous system is the principal seat of the morbid process. Inasmuch as dogs are the most

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