

suffering from incipient heart disease to run about and so damage the heart still more, or, perhaps, start heart disease in consequence of getting about. It is as well to keep the child in bed some weeks after all symptoms have disappeared. These points are specially insisted upon, as the nurse will have gained her experience in children's nursing in hospitals, where, owing to lack of accommodation, children barely convalescent have to be discharged in order to make room for graver cases, but whenever possible the rules laid down must be carried out. The doctor will probably begin treatment by evacuating the bowels with a calomel purge, which will help to clean the furred tongue; then in mild cases a simple saline, such as citrate of potash, will be given. When there is more pain salicylate of soda will be prescribed, and the painful joints may be covered with belladonna and glycerine, and surrounded with cotton-wool. A little Dover's powder at night will often produce sleep, and act on the skin. If there be heart disease some doctors do not give salicylates, as they may disturb the heart's action, and if they are given or not the nurse should, every four hours, examine and report carefully the condition of the patient's pulse. Leeches or blisters are often used if heart complications come on. In such cases the child may have to be propped up in bed to relieve the dyspnoea, and alcohol is often necessary, and may have to be used freely, especially if the heart disease is accompanied by inflammation of the lungs, which unfortunately is often the case. Sometimes vomiting supervenes, and this is one of the worst symptoms, generally betokening a fatal ending. Rheumatism has a great tendency to relapse, and this risk is increased if soup, beef tea, or meat be given too soon in the convalescence. After pain has disappeared for some days custard, rice, and other milk puddings should be added to the dietary, but meat and soups should be withheld for some time longer. During convalescence great care in the clothing must be taken; such children should habitually wear woollen underclothes, not omitting the covering of the arms and legs. They should be carefully protected from sudden changes of temperature or dampness, and an occasional course of a tonic such as cod liver oil and iron, or Parrish's food, etc., is very useful.

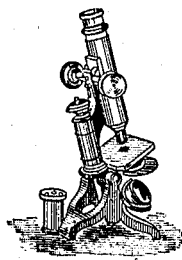
With regard to the treatment of a rheumatic child, either one who has had attacks of acute rheumatism, or one who has suffered from the

lesser rheumatic ailments, and one who has a marked hereditary taint, great care has to be exercised. In such children disease may be creeping on when we least suspect it, and may lead to permanent heart mischief. The diet must be varied, containing plenty of easily digested vegetables, in addition to plenty of milk and ordinary meat food. Flannel clothing is essential, and it is most important that the limbs be properly protected. Any overstrain either in work or play should be prevented, and the slightest indications of excess, such as exhaustion, headache, nightmare or nervousness must call for more moderation. A dry, sunny climate and a gravel soil are important. The bowels should be attended to, and if necessary a gentle aperient such as fluid magnesia, cascara sagrada, senna, etc. should be given.

Arthritis deformans or osteo-arthritis may begin in childhood, usually with pain and stiffness in the joints, and occasionally with fever and swelling of the lymphatic glands of the axillæ and groins. The joints become stiff and enlarged, and creak on movement. The disease tends to extend gradually or by fits and starts, and a joint once attacked, never gets quite sound, and usually gets worse. Careful clothing and protection from sudden atmospheric changes is very important, and a tonic, such as cod liver oil and iron, or Parrish's food, etc., is often useful.

(To be continued.)

Medical Matters.



Some most instructive articles on Common Diseases of the Ear, by Mr. Macleod Yearsley, F.R.C.S., have been appearing in the *Medical Times*. We quote from the section headed

PHYSIOLOGY.

By means of the pinna and external meatus, waves of sound are concentrated and conducted to the membrane.

On reaching the membrana tympani, the sound waves cause that structure to vibrate, and its vibrations are transmitted by the ossicles to the perilymph. Thence passing up the scala vestibuli, the vibrations are communicated to the membrane of Reissner, cross the central canal of the cochlea and, passing through the membrana basillaris, reach the membrana secundaria of the fenestra rotunda by the scala

[previous page](#)

[next page](#)