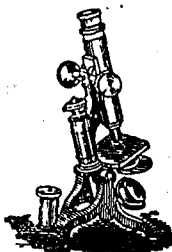


Medical Matters.

DRUGS CONTRA-INDICATED DURING PREGNANCY.



Dr. Hugunein says: At the head of dangerous substances for the pregnant woman may be placed sodium salicylate, ergot, salicylic acid, and salol; then come purgatives, antipyrin, acetanilid, sulphonal, and cocaine.

ACUTE TYPHLITIS.

Dr. Stoker writes: I have rarely seen a case of acute typhlitis in which the large bowel was not full of old fæces, and I have still more rarely seen a case in which the colon could be unloaded in which recovery did not take place. So true is this, that of late years I have nearly always regarded the emptying of the colon as ending the immediate danger to life, provided, of course, that the inflammation has not proceeded to the point where an abscess has formed or perforation taken place.

ACID FRUIT AND MALARIA.

It is known, says a contemporary, that the anopheles mosquito spreads malaria fever, but there are localities apparently favourable to the development of malaria where these mosquitoes abound, and yet they are exempt from malaria fever. Dr. Schoo, from experiment, finds that mosquitoes are hard to infect with the malarial parasite as long as they are fed on acid fruits, and easily infected when they are withheld. The observation agrees with one of Professor Celli, who noted that one of the Italian areas immune to malaria was remarkable for the cultivation of the tomato, a food rich in vegetable acids and attractive to mosquitoes.

PNEUMONIA: AN INFECTIOUS DISEASE.

Writing in a recent issue of *Medical News*, Dr. J. O. Cobb declares that a careful study of the clinical histories of cases in large hospitals is convincing that the "cold" theory is untenable. It is a disease incident to overcrowding and caused much by man's own fault, because it could nearly be wiped out by careful details of ventilation and disinfection. It kills as many people as tuberculosis, and is increasing rather than diminishing. Cold or dampness has nothing to do with its spread, though dryness is a great factor. It is appalling to note the stupendous death-rate and to see that nothing

is done to check the spitting habit, which seems to be the only cause of its spread.

A NEW CURE FOR RHEUMATISM.

Those who are what are popularly called "martyrs to rheumatism" will be startled to hear of the application of a common bucolic belief to the treatment of that disease. It is not, perhaps, generally known that the sting of a bee has long been regarded by the poorer agricultural classes of Europe as a cure for rheumatism. Dr. Perc, of Marburg, Germany, has recently been advocating its efficacy, and has declared that he has thoroughly tested it and demonstrated its efficiency in 500 cases. If a bee stings a person affected with rheumatism, the stung part does not swell until the bee poison has been frequently introduced, when the rheumatic pain vanishes. Dr. Perc's mode of procedure is to allow his patients to be stung at first by a few bees, gradually increasing the number, and he asserts that by this treatment he has cured patients suffering from obstinate and most painful rheumatism.

PROLONGED WITHDRAWAL OF FOOD.

Dr. T. D. Parke, in a paper in the *Journal of the American Medical Association*, gives the details of two cases of children ill with intestinal disease, ileocolitis, who were kept without food, one for five days and nights, the other for eight, both recovering. In the first case the child had fever, convulsions, and bloody stools. Plain water was given, until at the end of five days the reduction of temperature and change in the character of the stools warranted the giving of diluted food, broths, whey, and, lastly, modified milk. In the second case albuminised water was given at the end of five days, but, the symptoms being aggravated, food was again withheld for three days more. The child lost flesh, but was not extremely emaciated. The prolonged withdrawal of food is not advocated indiscriminately. In most cases forty-eight hours is sufficient. Children ill with the severer forms of intestinal disease will be more comfortable, live longer, and recover more quickly on water than they will on food of any description that a disturbed digestive tract cannot assimilate.

The theory underlying the above treatment is evidently that which has long been recognised, as a sound principle in surgery; namely, that the affected part should have rest, and so be afforded the best chance of recuperating.

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