

Medical Matters.

A JOURNEY THROUGH THE AIR FROM A MEDICAL STANDPOINT.

“Recent achievements in the science of aero-travelling have,” says the *Lancet*, “given a decided stimulus to the idea that general locomotion through the air is within sight. It certainly seems that difficulties are rapidly being surmounted, but still the risks are very great; the weather must be favourable for one thing, and then there must be no hitch in the motor engine. After all, no air-trip as yet can be started with the same certainty as a trip by land or by sea. The method of progression is under fair control, but stability under all conditions is not yet amongst the triumphs won. Supposing, however, that it was, the fact has then to be realised that a trip through the air will involve a good deal of nerve. The giddy height will have to be faced, the sudden swoop down or rise upwards with their disagreeable effects for a great many people will have to be reckoned with. Sea-sickness is a terror to many people, and the chances are that air-sickness will be worse. Most persons again have experienced the unpleasant feeling in a lift when it commences its descent or in a swing when, like the pendulum, it swings back. Not a few people refuse to stand close to the edge of a cliff or to trust themselves to look down into a vast chasm of space immediately beneath their feet owing to vague feelings of giddiness, fears of falling arising out of a sense of a jeopardised equilibrium. And yet these same people converse glibly about the nearness of the day when aero-traffic will be an accomplished fact, and point in support of their view to the enormously rapid advances which motor traffic in the streets has made. When the question is carefully considered in detail it will be conceded that there is hardly anything that is comparable between the air motor and the land motor from the point of view of attaining practical success. The problem in the case of the former is so complicated by the first requirement—the conquest of that great force which, do what we will, pulls us back again to earth the moment we dare to rise from its surface. No special motor appliance is required to keep afloat on the sea or to keep a stable position on land, but we can only gain support in the air by means of moving machinery analogous to the wings of a bird or by utilising a buoy or a substance which is much lighter than air, and which, therefore, tends to float upon it. The machinery in the former case must obviously be well-nigh perfect and incapable of breaking down, while the difficulty

in the latter case is the enormous bulk of floating gas that must be used. In short, the advances yet to be made in order to bring aviation within the practical affairs of daily life must still be very far-reaching. Then, assuming the great consummation has been reached, will the human organisation be able to stand aviation? This is by no means certain, having regard to the constant changes of atmospheric pressure—with their marked effects upon the respiratory and circulatory processes—which a journey through the air must entail.”

The above article shows that it is not probable that aero-travelling will be adopted for some time to come as a popular mode of conveyance.

BACTERIA IN THE EYE OF THE NEW BORN.

Dr. McKee states in the *Montreal Medical Journal* that Rosenhauch after examining the conjunctival sacs of two hundred new born babies came to the conclusion that the conjunctival cul-de-sac is absolutely clear immediately after birth. After twenty-four hours the bacterial flora is constant. It is not to be differentiated from the adult. The *Staphylococcus non pyogenes, non liquefaciens*, and the *Bacillus xerosis* are constant inhabitants. Other micro-organisms are only sporadic. Pathological micro-organisms are seldom found and then only a few. Twenty-four hours after birth the conjunctival sac was never free from micro-organisms. Gonorrhoeal infection is hardly possible during birth, but usually occurs during the first couple of days of life.

ELECTRIC ANÆSTHESIA.

Dr. Louise G. Robbinovitch, of New York, recently gave a demonstration before a large assemblage of physicians and surgeons in Hartford, Conn., of the possibilities of electric anæsthesia. The electricity was applied in the case of an amputation of four toes, necessitated by gangrene supervening after frostbite, by Dr. Marcus M. Johnson. The operation lasted forty-five minutes, and the patient laughed and talked freely with the doctors the whole time, being unconscious of any unpleasant sensations, even when the bone was separated with bone forceps. The *Medical Record* reports that this is the first time in the annals of surgery that electricity has been used for anæsthetic purposes on man, and the demonstrator was a woman.

THE IMPORTANCE OF FOOD.

In the preventive treatment of consumption, Sir Thomas Barlow regards good food of primary importance. Pure milk, good butter, bacon, and well cooked vegetables, he considers necessary.

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