

## Medical Matters.

### THE CARE OF CASES OF OPHTHALMIA NEONATORUM AND MEASLES.

At the meeting of the Managers of the Metropolitan Asylums' Board on Saturday last a report was presented by the Children's Committee on two letters from public bodies, asking the Managers to provide accommodation for patients suffering from ophthalmia neonatorum, one being from the Lewisham Borough Council and the other from the St. Pancras Borough Council.

In making provision for the in-patient treatment of new-born infants, beds must also be provided for the mothers. There was only one of the four ophthalmic hospitals in London which could admit both mothers and babies, and it had three beds available for this purpose.

The Medical Officer to the Board for General Purposes, Dr. Cuff, reported that assuming more accommodation was required for the in-patient treatment of these cases, it was desirable that it should be provided, if possible, by the ophthalmic hospitals, or the general hospitals, since thoroughly skilled treatment and nursing were essential to their successful management. He suggested that the proper course to be pursued by those who wished to see more beds devoted to this disease was to obtain a grant from King Edward's Hospital Fund to enable empty wards to be used for the purpose. Charing Cross Hospital had such wards, and only lack of money had prevented the authorities of the Royal Ophthalmic Hospital at Moorfields from making provision for such cases.

The Clerk to the Board was authorised to arrange for the admission of non-pauper cases of measles to the Managers' hospitals in cases of sudden or urgent necessity, in conformity with the provisions of an Order issued, under Section 80 of the Public Health (London) Act, 1891, by the Local Government Board.

### THE CARE OF THE TEETH.

Dr. J. Sim Wallace, M.D., D.Sc., L.D.S., speaking at the recent Imperial Health Congress, said that decay in the teeth and other dental diseases may be easily prevented. To do this it is only necessary to recognise and apply an apparently new, but an obviously correct principle of dietetics, namely, that the diatetic régime should be such as will leave the mouth and alimentary canal in a hygienic state. Foods may be divided into two classes, namely, those which are *not* of a cleansing nature and are liable to induce decay in the

teeth. These are sugary and farinaceous foods in general when prepared without accompanying fibrous element. Examples: Sweet biscuits and cake; bread and marmalade; bread and jam; new bread without crust; bread soaked in milk; milk puddings; porridge and milk; stewed fruit; chocolate and sweets of all kinds; liquids, cocoa and chocolate.

All these foods may, however, be eaten without injury to the teeth, provided that some food or foods of a cleansing nature are eaten immediately after. The following is a short list of the common foods which are cleansing or otherwise antagonistic to the decay in teeth. Fibrous foods generally, examples: Fish, meat, poultry, bacon. Uncooked vegetables, lettuce, cress, radish, celery. Cooked vegetables are, as a rule, cleansing, but in a less degree. Stale bread of any kind with crust, toasted bread, twice-baked bread, pulled bread and cheese. Savouries. Fresh fruit, especially apples. Fatty foods, such as butter. Liquids, tea, coffee, water; also most soups and beef tea.

To a certain extent also the development of the jaws, and consequently the regularity of the teeth, depends upon the habitual use of food which requires efficient mastication.

### THE CAUSE OF SLEEP.

At the National Museum for Natural History in Paris, M. R. Legendre lately delivered an extremely interesting lecture on "The Physiology of Sleep," which summarises the latest researches on the subject, and devoted himself chiefly to investigating the cause of sleep, of which many explanations have been suggested.

He showed by fairly conclusive arguments, says the *Athenæum*, that this could be neither brain-pallor nor intoxication by carbonic acid, nor the presence of narcotic substances in the blood, theories which have had in their turn greater or less success; and finally avowed his preference for the view of Prof. Claparède (of Geneva) that sleep is not the result of fatigue, but an inherited instinct designed to protect the organism against the ill-effects of fatigue. He pointed out, however, that an injection of the cerebro-spinal (cephalo-rachidian) fluid from an animal suffering from insomnia would produce the same malady in one otherwise healthy; and that experiments were now being made to determine the toxic substance present in the fluid in question.

Some of these experiments seem to show that the effect of sleep is limited to the brain and nerves. M. Legendre's whole lecture is extremely interesting, and is reported in full in the *Revue Scientifique* of June 17th.

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