characteristics of what we should prefer to believe an ideal food, physicians must remain loyal to milk as one of the old standards, but not necessarily as an exclusive diet in the nourishment of typhoids. Experiment has proven that collateral nourishment may be supplied, much to the benefit and early convalescence of the patient.

We are all familiar with the torturing hunger complained of by the typhoid patient, sometimes throughout the entire course of the disease, but more especially toward the decline of fever, and until convalescence is well established. This condition may be partly due to a natural aversion to milk in the first place, or possibly to the resistance of the stomach under abnormal conditions, and consequent loss of nourishment by vomiting. This lack of nourishment may be supplied to good advantage by allowing the patient a certain amount of oatmeal jelly, rice gruel, boiled rice and calves' foot jelly; milk sugar solution (1 oz. equals 15 grs.) given in 2-ounce amounts per day, either alone or with milk and jellies, olive oil and butter. The various flavours seem to stimulate the appetite of the patient sufficiently to relish his food. Rice in any form leaves no residue in the intestines; being wholly a carbohydrate food, it is entirely burned up in the system, providing that the metabolism is equal to the intake; if not, the sugar will appear in the urine.

The amount of residue from the oatmeal jelly is not sufficient to raise an objection. Broth as an associated item of the nourishment allowed for typhoids is not, in fact, nourishing at all. It is merely the extractive containing the flavour of the nourishing properties of the meat, which have been removed. The broth, therefore, is but a liquid stimulant and solvent, and together with generous amounts of cold water—not ice water—furnishes the very essential moisture to the parched tissues, giving tone to the body and producing a free flushing out of the kidneys, and elimination of the waste products from the system. Then, in conjunction with milk and broth, but not substituted therefor, as both are essential in their respective virtues, may be given a variety of foods, which must necessarily appeal to the taste of the patient, divert the development of aversion to milk, combat the feeling of hunger, add to the sustaining powers of the body, and assist in producing early convalescence, without the usual excessive weakness upon muscular exertion. The characteristic emaciation may also be offset by this procedure in feeding. Observations made while in charge of a medical ward in the Boston City Hospital convinced me of the benefit of generous but careful feeding in typhoid cases. Some extensive experiments were made along these lines, involving for the nurse the careful preparation of the various nourishments—measuring, weighing and estimating the caloric value; the intake, output and ingestion, preparation of

DIET TABLE.

Ice Cream	Milk, oz.	Eggs	Bread, oz.	Olive Oil, drams	Milk Sugar, grains	Water, oz.	Cream, oz.	Oatmeal Jelly, grains	Butter, oz.	Broths, oz.	Total Calories
..	84	..	..	..	..	48	..	..	..	..	1,680
..	76	..	..	..	..	42	..	..	..	24	1,520
..	64	..	..	..	..	68	..	..	..	24	1,280
..	56	..	..	..	..	42	14	..	..	24	1,995
..	40	..	..	..	9	34	36	330	..	16	3,236
..	48	..	..	3	27	32	24	330	½	..	2,931
..	45	..	..	3	90	32	20	720	3	16	3,823
..	32	..	..	3	67	32	17	540	2¼	16	2,734
..	32	..	..	3	96	74	28	720	3	24	4,089
..	48	..	..	3	96	32	12	720	3	28	3,423
		Porridge, oz.									
..	48	8	..	1½	93	54	12	720	3	44	3,605
..	48	1	..	1½	28	42	9	180	1	24	3,071
								Porridge			
..	80	2	7½	1½	24	62	8	720	1½	24	5,329
1	40	3	8½	1½	24	28	8	720	1¼	8	4,629
..	80	2	10	1½	24	36	12	720	1¾	16	5,839
..	50	2	7	1½	24	54	12	720	1¾	8	5,079
..	50	2	6	1½	24	36	8	960	1⅜	..	5,107
..	36	1	7½	1½	4	40	8	480	1½	..	3,791
..	32	2	7	1½	6	40	..	720	1½	..	3,829
..	23	6	9	..	7	32	10	720	1	7	4,159
2	30	5	11½	..	6	16	10	720	2–3	..	4,434

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