both in training medical students and pupil midwives and nurses, has a world-wide reputation, and is deserving of all support.

THE MIDWIVES (SCOTLAND) BILL.

On Wednesday, December 1st, the Midwives' (Scotland) Bill, after having passed through Committee without amendment, was read a third time in the House of Commons.

DRUG HABITS IN SUCKLINGS.

Lichtenstein (*New York Medical Journal*, October 30th, 1915) as reported in the *British Medical Journal*, records the case of an infant under his care in a prison. The mother was 21 years of age; there was no history of any morbid condition, and the only relative with a drug habit was the husband, who had taken heroin and morphine for about a year. The child was born in a hospital, and when the mother returned home she was seized with abdominal pains. A friend gave her a sniff of a white powder, and she fell asleep. On awakening after a long slumber she vomited and was attacked with severe cramps. Yet she was persuaded to take another sniff, and she continued to inhale the powder till it became a confirmed habit. All the time that she inhaled the snuff she also nursed her infant. It slept for very long and when awake would curl up in cramps and cry until nursed. It desired to be nursed every hour. Whenever the mother felt the need of the drug heroin, which it appears was known to her as *yen yen*, the child would yawn and sneeze and perspire freely, cry, and suffer from cramps. It was subject to diarrhœa. The supply of milk never failed when the mother was taking the heroin, although it is generally taught that opium and its derivatives lessen the amount of milk. After seven months the mother was not able to get any heroin, and so began to use morphine hypodermically. Then the milk excretion steadily diminished, so that she had to nurse the infant more frequently. When arrested and imprisoned the mother's mammary glands were small, and little milk was excreted. The catamenia, completely suspended during the eight months that she took the drugs, returned two days after they were withdrawn. Lichtenstein also reports another instance in his experience in which an infant 16 months of age had contracted, so to speak, the drug habit in lactation. It was very anæmic, yet not emaciated, the pupils were contracted to a pin-point diameter and did not react to light. It slept all the afternoon and night, and next day had strong cramps and sweated profusely. The author felt obliged to administer paregoric. Then the child was fed by the bottle, but the mother nursed it every twenty-four hours, preferably at night. The infant took three times daily a minim of tincture of nux vomica and five of camphorated tincture of opium to the drachm. At the end of four days the child seemed more cheerful and the cramps had ceased. Castor oil, 2 drachms, was given on the first and third night.

MILK AND ARTIFICIAL FOODS.

The tenth lecture, under the auspices of the National Association for the Prevention of Infant Mortality, was delivered on December 7th, at the Royal Society of Medicine, 1, Wimpole Street, by W. G. Savage, Esq., M.D. (County Medical Officer of Health for Somersetshire).

His subject was "Milk and Artificial Foods."

He said that the subject ought to occupy at least a couple of lectures. In the time at his disposal, he would only deal with principles which should guide his audience in giving advice to others. Nothing was so disastrous as technical knowledge without a full knowledge of corresponding principle. He then proceeded to deal with the essential difference between cows' and human milk, pointing out that in the protein of the former lay the great difficulty of substituting it for breast feeding. After dealing with the salient chemical difficulties, he sad there was that finc subtle physiological difference which some doctors laid great stress upon—the difference in the product of the mother and the cow.

A far more important difference, however, existed as regards bacteria. Human milk was sterile and passed direct to the infant.

This was, of course, not the case with cows' milk. The cow was a dirty animal, its buttocks and udder often coated with dung. He had himself seen a man come direct from carting dung to milk without washing his hands. He would welcome the return of milkmaids, as they were more cleanly than the men. Other sources of danger lay in the cow itself. Dr. Savage said he had investigated 600 cases of inflamatory sore throat which were directly traced to the cow. Putting it at a low figure, ten per cent. of milk samples contain the tubercle bacillus. Further dangers lay in the transport, and one had only to examine the milk cans at any railway station to see that they frequently had holes in them which admitted contamination. They were supposed by the farmer to be necessary for the preservation of the milk, but this was not the case.

Dealing with the methods of obviating these dangers, the lecturer said that he himself preferred that of bringing the milk to the boil.

Of modified milks, the dried milk was the most satisfactory, especially that which was dealt with by the vacuum process. Of course, its value depended on the quality of the milk it was prepared from. The advantages were that it was sterile or nearly so, was easily kept and more digestible, and, as a rule, not more expensive than fresh milk. It was easy of distribution and was much used at infants' depots. He believed that there was a big future before it.

Condensed milk was prepared by a process which evaporated the water. Its advantages were that in the unopened tin it was sterile, and that it was easy for the mother to use.

The milk once opened was a convenient vehicle for bacteria, and it was easy to imagine that dust, flies, &c., in a poor home, and the warm atmosphere favoured their production.

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