and had gained some flesh. Unfortunately she was not weighed before and after the course of treatment. The patient recovered.

Miss —, age 28 years, had typhoid fever. Deafness, amblyopia and semi-unconsciousness occurred in the third week of the disease, with inability to swallow. There were no signs of hemorrhage of the bowels at any time; pulse was exceedingly feeble and dicrotic, often imperceptible. Hot or warm milk, c.c. 118 to 237; sodium chlorid, grams 2, and whisky, c.c. 30 were given, per rectum, every four to eight hours night and day for three months or more. At times the whites of one or two eggs were added to the milk, or a warm egg-nogg was given per rectum.

L. T., age 2 years, a negro child, first had scarlet fever, then diphtheria. In three weeks from date of contracting diphtheria the palatal and pharyngeal muscles were in a state of paresis, and patient could not swallow. Rectal feeding was resorted to with satisfactory results. Milk, c.c. 118; whisky, c.c. 7.4; quinin, grams 13, and salt, gram .65 were mixed and injected warm into the bowel every four to eight hours. Rectal feeding was continued over a period of two months.

The writer has repeatedly passed enema to caput coli by elevating the hips.

A patient now at the Joseph Price Hospital, Stanford, Ky., who had chronic gastro-enteritis for years had a subacute attack and for three weeks or more has been fed with nourishing and stimulating enemata and is improving nicely.

The last four cases, in addition to the stimulating and nutritive enemata, were given the tincture of nuxvomica.

Aphorisms.—The rectum, sigmoid and colon must be washed out once or twice a day with hot sterilized water to which has been added carbolie or boric acid.

Hot or warm soothing, non-irritant, nourishing, stimulating or sedative and tonic aseptic enemata can be used in rectum with impunity. Whisky, brandy, alcohol, salt, sugar or sodium carbonate are crystalloids and hasten absorption. By bringing to the boiling point, then adding pancreatin, sodium carbonate or sodium chlorid prepares milk for colonic and sigmoid absorption. Elevate the hips of the patient to 40 or 60 degrees, secure the advantage of gravity and the retrograde action of the rectum and sigmoid from anus to caput coli. When the hips are thus elevated the anus and lower rectum lose their irritability and reflex excitability, the anus and lower rectum if in a physiologic condition are made patulous and, with the coccyx, are easily retracted. The so-called "passing the rectal tube beyond the sigmoid into colon," as is taught by our college professors can not be done. The author has repeatedly proven that unless you place the patient in the "Carpenter posture" the tube is bent upon itself, one or several times, or the tip descends back toward the anus and the enema is found in the rectum. The safest, surest and best way to intubate the sigmoid is in the Carpenter posture, and best by Carpenter's sigmoidoscopy. Where there are hemorrhoids, anal fissures or ulcers in lower rectum, anal divulsion should be done as a palliative prophylactic measure, under anesthesia.

Rectal divulsions of the sphincters, besides its parietic and therapeutic effects on the lower end of the rectum and anus, causing rest, making the anus patulous and allaying irritability and curing pathologic lesions, has another function, that of nerve-stretching of the fourth

sacral and inferior hemorrhoidal nerves, thereby cutting off connection between the spinal cord, the levator and sphincters, and placing at rest the bladder, rectum, vagina and perineum.

In the Carpenter posture the colon advances toward diaphragm, the sigmoid becomes elongated, loses some of its curves and becomes more like a straight tube—the longer the mesosigmoid the more elongated and less curved the sigmoid, and *vice versa*.

In rectal feeding the enema should always be as warm as can be borne. Beef peptonoids combined with warm milk, bovine and water, with or without whisky or brandy, or hot milk with salt or sugar make nutritive enemata that can be alternated as required. If a tonic is needed, quinin, strychnia or tincture of nuxvomica can be added to the nourishing enemata; if an anodyne, morphin, papin or laudanum can be given in the same manner.

IMPORTANCE OF PHYSIOLOGICAL KNOWLEDGE TO THE GEN- ERAL PRACTITIONER.

Presented to the Section on Physiology and Dietetics, at the Forty-eighth Annual Meeting of the American Medical Association held at Philadelphia, Pa., June 1-4, 1897.

BY ALBERT E. MILLER, M.D.

BOSTON, MASS.

The lowest form of life is a cell, which is defined as a minute mass of protoplasm. Each individual cell is of sufficient importance to have a life history of its own. It has its origin from some pre-existing parent cell, grows, fulfils its mission, produces other cells, wastes away and dies. All action is attended with waste. There must be food supplied in proportion to this waste or existence would cease. If the supply is less than the waste existence may be prolonged but must finally terminate. If the food supply equals the waste, there will be no apparent change. If it exceed the waste, there will be increase in growth. To keep an animal in a perfect condition the quality and quantity of food should be such as will best supply the place of that which is worn out. In the development of the infant after birth nature furnishes food which is typically perfect. In milk we find all of the various elements necessary for sustaining life and all that is necessary for the nourishing and building up of the tissues. In it we find albuminous material in the form of casein and serum or lac albumin, fats in the cream, carbohydrates in the form of lactose or milk sugar, salts in the form of calcium phosphate. All that is necessary for the development of every part of the system, bone, muscle, nerve, etc., in the right proportions. If from any cause we are obliged to substitute cow's milk, which is too rich in casein and fat, and deficient in sugar, we dilute with water and add sugar so as to bring it more nearly to the composition of human milk. Other foods may be successfully substituted if we keep in mind the exact composition of the typical food which nature furnishes. We should always imitate nature's food as nearly as possible unless from some diseased or deranged condition it is desirable to make a change to meet some morbid demand.

In its mother's milk the infant finds all that it needs for the growth of its body. The casein is used in the development of its muscles and gelatinous tissues. The cream is changed and deposited in the adipose cells or consumed at once to produce the animal heat.

The phosphate of lime is used to develop the osseous system which is now increasing rapidly. If there is a change or necessity to meet, nature modifies the food accordingly. In the case of the calf, colt and animals which commence locomotion very soon after birth, where exercise is often very great, the nitrogenous principle of the milk is increased. This excess of casein is necessary on account of the excessive waste resulting from the extra exercise. Judging from these facts we would naturally, as the child grows older and exercises more, change the food, increasing the nitrogenous principle in proportion, to meet the resultant waste. A knowledge of physiology will enable us to select that kind of food which is demanded by the age, condition and temperature. Foods are usually divided into organic and inorganic. A very convenient subdivision is to divide the organic into first, nitrogenous; this embraces substances consisting of proteid, examples of which are albumin, casein, myosin, gluten, fibrin, legumen, etc.; second, non-nitrogenous, these are: a, amyloid or saccharin bodies, sometimes called carbohydrates; examples of these are starches and sugars; b, oils and fats, substances which contain carbon, hydrogen and oxygen, the oxygen being less than in the amyloids and saccharin bodies.

Inorganic: first, foods which furnish to the system the required salts; second, liquid food, this is chiefly water. After we thoroughly understand the best diet for perfect health, it is comparatively easy to select a diet for different temperatures and conditions. In very cold seasons and climates we require more heat-producing material. This is furnished by the carbohydrates and the oils and fats. In warm seasons of the year, or if our employment is in a warm room we should diminish the use of these articles in proportion to the change. If our employment requires great muscular exertion we should increase the tissue-making material; the proteids, foods which contain a large amount of nitrogen, such as albumin, casein, fibrin, gluten, legumen. These are to be found in eggs, beef, milk, bread, beans, etc. In diseased conditions we should select the food with still greater care. If, as in fevers and inflammations, there is an excess of heat we should diminish the amount or abstain from the use of heat-producing foods, such as starches, sugars, fats and oils. If there is a lack of exercise and a consequent lack of waste of tissue, we should lessen the tissue-making material. If there is an excessive waste of nerve tissue we should give our patients the kind of food that will compensate for this excessive waste. Experience has taught me that in the treatment of phthisis, neurasthenia and in fact all wasting diseases more may be done with food than with medicine. Medicine may be an aid but the great reliance should be placed upon the food. If in health we are made directly of the food we eat and our condition is influenced by that food, how much more important is this knowledge when our patient is wasting away from disease. Since putting these principles into practice I have not lost a case of typhoid fever and my success in the treatment of other diseases (most notably chronic) has been much increased.

The Initial Manifestations of Leprosy.—Prof. O. Peterson concludes from a study of 1200 cases of leprosy, that the mucous membrane is first affected by the bacillus, especially the nasal mucosa. The first manifestation on the skin is in the form of spots, usually red, sometimes symmetric, either on the face or extremities. The nodules develop later.—*Wratsch*, No. 43.

THE REGULAR PROFESSION OF MEDICINE.

Read before the Kalamazoo Academy of Medicine at its Annual Meeting, Jan. 4, 1898.

BY W. H. HAUGHEY, M.D.

BATTLE CREEK, MICH.

The average medical writer is so deeply interested in scientific investigation as to rarely, if ever, think of writing on the subject of the regular profession of medicine. This probably accounts for the scarcity of articles seen on that important subject, but never was the scriptural injunction, "physician, heal thyself," more applicable than at the present time.

The term "regular" is but little understood by the laity, most thinking that any one who assumes to be a doctor, and who obtains his living by the practice of medicine, is a regular doctor because he is nothing else, and while I would fain think otherwise, still I am forced to believe that there are some bearing that proud title that are not clear enough in their understanding of the definition of the word to be ready at all times and at all places, to give a full and clear explanation of its meaning.

I am frequently asked, "Doctor, are you an allopath or a homeopath?" My reply invariably is, "I am neither; I am a regular." That detestable sand-bur, allopath, that was thrown at the regular profession by Hahnemann and still continues to attach itself to our clothing, has done more to befuddle the minds of the laity than anything else, except the apathy displayed by the profession itself regarding it. If every member of the regular profession would immediately and positively repudiate the word as soon as, and on every occasion when it is, applied to us, the laity would soon discard it and we would hear it no more.

The members of the regular profession can no more justly be termed allopaths than they can be homeopaths. Accepting either implies that we rule out some things from our armamentarium, and thereby lessen our usefulness just that much. As the homeopathist uses "similars" to the exclusion of all other drugs, and the allopathist uses "dissimilars" to the exclusion of all others, it is plain that each by curtailing his source of supplies and depending upon those belonging to the creed of his adoption, has lessened his usefulness in exact measure to the therapeutic value of the remedies discarded.

The word "pathy" signifies narrowness, and if a sick man trusts himself to the care of one who follows a pathy, he must simply conform his sickness to the path or pathy. In other words, the practitioner, confident in the infallibility of his pathy, requires nature to conform herself to it, and if she does not, then the patient must die. Fortunately a large per cent. of sick people get well anyway, and nature unaided would effect about 90 per cent. of cures of some kind.

The regular profession rises superior to pathies, and uses anything under heaven that will relieve suffering humanity no matter from whom or what source it comes. Neither must you use large doses, for there is nothing to prevent a "regular" from using infinitesimal doses if he believes it best for his patient.

The regular profession rationally pursued requires a thorough knowledge of physiology, pathology and therapeutics. Then, given a pathologic condition, simply apply the rational therapeutic remedies to quickest and best aid nature to restore a physiologic condition.

There is but one science of medicine, and as science is broad as the universe, it follows that the science of