the upper end of a hollow hard rubber handle, through which runs a piece of rubber tubing attached at its upper end to the reservoir, while the lower is armed with a curved gold nozzle which fits firmly into the lower end of the handle and is removable at pleasure. The current, whose force depends on the height of the column of liquid, is retarded or stopped by pressing a short metal piston down upon the tubing with the index finger. The length of the whole apparatus is about eleven inches. In using the instrument no assistant is required, and for washing out cortical remains, the current is as strong as is consistent with safety. In hypopyon cases, however, we may require, and it is perfectly safe to use, a much stronger current; and for them I use the original form of the instrument with a longer bit of tubing and a larger reservoir, the latter being held by an assistant, or attached by a sliding clasp or ring to an upright post. It is safer to have two distinct instruments, one for cataract and the other for hypopyon cases.

Form 1.

Form 2.

Actual Size.

THE PRIX BÉHIER.—The Faculty of Medicine of Paris have authorized the acceptance of 30,000 francs, a legacy from Madame Béhier, the income of which is to go to furnish a biennial prize to be known as *Prix Béhier*, for work in medical pathology.

FEEDING THE YOUNG.

Read in the Section of Diseases of Children at the Forty-first Annual Meeting of the American Medical Association, at Nashville, Tenn., May, 1890.

BY O. H. PHELPS, M.D.,

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It goes without saying that a large majority of the children who die under the age of 5 years perish from diseases of the alimentary canal, and in large cities the rate of mortality is such that even Malthus would doubtless call a halt. That other causes than bad feeding come in for a share in the work of fatality we will not deny, neither will we discuss them in this paper. That bad feeding is the principal cause is fully borne out by the writer's observation and experience.

What is bad feeding? Mother's milk when the mother is herself badly fed all through the period of gestation and lactation; when her alimentary canal contains more or less fermenting material from excess of undigested hydrocarbons; and her whole dietary lacks tissue building material to fairly support her own body, much less that of her child. A hungry man is quarrelsome and discontented—see the Irish people fed on potatoes. An under-fed mother is weak, nervous and fretful, and the effect of this alone is often disastrous to her child. The writer recalls a case where the child several times nearly perished in convulsions caused by an explosion of anger in the mother who was badly fed, weak, and nervous. He advised weaning the child and the trouble ceased.

We will not discuss the proper feeding of the mother here, but would refer to a little book by Dr. E. Cutter, of New York, "Food in Motherhood," which we heartily commend for its treatment of this important subject.

A very common practice prevails among all classes of people of feeding solid food to infants 2 months old and upward. Sometimes they commence younger. That the digestive organs are not sufficiently developed to digest solid food is indicated by the lack of teeth to masticate with. And this may be taken as a safe guide as to the proper time to commence giving solid food. And if the child is bottle fed, sugar is usually added to the milk to assist in the alcoholic and acetic acid fermentation, and as a logical sequence of such outrageous feeding nature throws up the sponge and the doctor is called who often has to follow suit. Emaciation, colic, acrid dejections passing through the bowels, a burning seething liquid mass, only a little less irritating than molten lead.

How shall we feed to avoid all this?

First, don't give mother's milk, if it is bad milk. Don't ruin the child's digestion by persistent nursing when it is evident the mother cannot furnish good milk. Don't give impure cow's milk, and good or bad don't put sugar in it.

Don't put starchy food into the child's—shall I say yeast pan?—unless you want more yeast, more colic, more cholera infantum, more dead babies.

Pure cow's milk sterilized will usually be well borne, if the digestion has not previously been ruined. This failing give beef essence and pepsin.

The writer has usually had indifferent success with the so-called infant foods of the shops. A child that can digest the best of them can as well or better digest a gruel, made of milk slightly thickened with meal made from twice baked bread. The bread made of entire wheat flour, is best when it comes with the advantage of cheapness and known purity, which cannot always be said of commercially prepared infant foods. There are some nice formulas for taking out a portion of the caseine from cow's milk and otherwise making it as near like mother's milk as possible; all of which are good on paper, but often very impracticable to be carried out, among the majority of the clientele of the busy practitioner. Some cases from practice will illustrate some of the results of bad feeding and their treatment.

Case 1.—Hattie C., æt. 2 years. I was called February, 1878. Was met with a diagnosis from the mother, "Doctor, my little girl has worms and we want some medicine to remove them, our remedies have failed." Child anæmic, bowels bloated and constipated, weak, nervous and fretful; sleepless and occasional slight convulsions; breath sour and tongue coated. "What does she eat?" "Appetite poor, but eats of everything the family has: potato, turnip, of which she is especially fond, bread, coffee, etc." Treatment, a mild cathartic to unload the bowels. All solid food strictly prohibited, and lime water and milk *ad libitum*. Child improved rapidly and mother rejoiced at so rapid recovery. At a subsequent visit mother inquired when she could let the child eat everything. "Not till she is 5 years old." Counseled her to keep her on milk.

Was called again in April. Child in same condition as at first, and with a woeful face the mother declared the worms were at work again, and while relating the sad tale the little subject came in from the kitchen with the worms in both her hands—cold cooked turnip which she was eating with a zest. The former course was repeated, and the child made a good recovery.

Case 2.—Mrs. H., brought her infant of 3 months on a pillow from her home twenty miles away. At first sight it seemed almost moribund, and had hardly strength to make its pitiful wail audible. It was a bottle-fed baby, and plenty of sugar had been added to the milk and oatmeal gruel that it was fed on. The child was emaciated almost to the last degree, and in constant pain. Took the bottle often and would be quiet

for a while after feeding, or as long as the carbonic acid from the fermentation acted as a soporific. Bowels very loose, discharges green, foaming and acrid, making surface raw wherever in contact. Took away all food for eighteen hours and gave warm water and salicylate of soda, then gave sterilized milk from which most of the caseine had been removed, and lime water. On the fourth day gave in addition a little beef extract. In ten days the child was taken home much improved, and was soon able to digest plain milk. Sugar was prohibited. Child made rapid recovery, and when last seen, five months ago, was a fine vigorous boy.

Case 3.—Willie M., æt. 2 years. March, 1888, child pale and anæmic, tongue coated, breath sour, bowels loose with green, acrid discharges; had constant cough. Parents alarmed, thinking it had consumption. Could not take milk; was fed on oatmeal and sugar, potatoes and bacon, in fact anything its vitiated appetite craved. Treatment: positively prohibited all starchy foods; gave beef essence and pepsin for a week, then added sterilized milk and lime water. Cough soon ceased. Bowels became natural and digestion improved. Made rapid recovery.

These will suffice to illustrate some of the conditions brought on by bad feeding. Very little medicine is needed in most cases. When indicated pepsin and salicin may be given. It is also desirable to flush the colon with warm water frequently.

The proper food is milk up to 2 or 3 years of age, after that bread made from entire wheat flour (fine wheat flour is deprived of most of the tissue building material contained in wheat), milk, eggs, lean beef and mutton, fruit without sugar; in fact sugar not at all.

Such a course will give less work to the undertaker, dentist and doctor.

CLINICAL OBSERATIONS ON VAGINAL TOTAL EXTIRPATION OF THE UTERUS FOR CANCER.

*Abstract of a paper read at the Forty-first Annual Meeting of the
American Medical Association, Nashville, Tenn., May, 1890.*

BY CHAS. A. L. REED, M.D.,
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In presenting this paper I desire to avoid all controversial questions as to the justifiability of vaginal extirpation of the uterus for cancer, but I shall proceed upon the presumption that, by a consensus of advanced professional opinion, it is looked upon as a fixed operation in surgical practice. It shall be my future purpose to discuss some clinical features of the cases requiring this operation, and to call attention to some features of technique.

My observations are based upon an experience