

encourages her husband, fagged and anxious for the common weal; and of the nurse, who takes in at a glance all the details and wants of the patient and ministers to his requirements with pity and devotion. It is this which gives rise to that compassion, sympathy, piety, and affectionate disposition which are the chief characteristics of a woman. It is the feeling of powerlessness which makes her identify herself with the unfortunate and unhappy, which natural pity is the base of all social virtues.

THE EFFECTS OF SOCIAL LIFE AND EDUCATION ON WOMAN.

There can be little doubt that social manners, education, and an infinity of circumstances may affect the qualities woman derives from her material organization, and even efface the original character which nature has given her. In the simplest condition, the man labors with his hands and with his wits for mutual support and protection, the woman rears her children, tends the sick, and conducts domestic affairs. Such, if the most primitive, is probably the healthiest and happiest condition for the female. Her sympathetic and susceptible nature has here every scope for action without being shaken by rude and oft-repeated shocks. In civilized life, especially among the upper classes, everything seems combined to foster and increase the natural affectability of woman's nature, and society renders her, already unfortunate by organization, the victim of the most painful and varied series of moral and corporeal afflictions. Medical philosophers have declaimed, and will long continue to do so, in vain, against the whole system of the education and bringing up of women, which is directed solely to the purpose of making them personally attractive, and subsequently securing for them brilliant settlements for life, at the expense of their health. Much might be written on this subject; suffice it at present to state that the useless and insipid lives that most young ladies lead, the total want of an intelligent interest and occupation, and the unnatural and artificial existence pursued, are highly calculated to injuriously enhance that natural affectability with which she has been endowed. The system of fashionable boarding schools, whose anxiety to render their pupils accomplished and fascinating at all costs results in a forced and at the same time imperfect training, combined with luxurious living, absence of exercise, and other healthy circumstances, tends to increase the irritability of the nervous system and to foster a precocious evolution of character. As this is increased, tone and energy are diminished. The girl returns from school a wayward, capricious, and hysterical young lady, weak and unstable in mind, habits, and pursuits. She enters into society, and there her whole mode of life further contributes to her unfortunate condition. The competitions, disappointed affection and vanity, the artificial excitements of balls, public entertainments, late hours, and all the frivolities and pleasures of fashion, tend in the same direction. The cultivation of music, poetry, novels, and other inflammatory literature nourish illusions contrary to the actual state of society. Her very dress seems made on purpose to interfere with the healthy function of her most vital organs, and to prevent the free play of muscular action essential to a sound constitution. Girls subjected to such a régime, when their minds and bodies should be guided in a totally opposite direction, have one order of faculties alone exercised, and these, predominating over the reasoning powers, cause a host of nervous, vaporous, hysterical, and hypochondriacal disorders. Thus women from their earliest days are constantly subjected to the yoke of prejudices, are under the necessity of a perpetual state of acting and deception, of dissembling their desires and real inclinations for the sake of propriety, of keeping to themselves the most powerful passions and the strongest propensities, and of feigning a calmness and indifference when they are devoured by a burning fire.

As to education, we have already pointed out the general unsatisfactory nature of the intellectual studies of most women. That idleness and the absence of suitable and substantial occupation for the mind which so commonly exists in the higher ranks of society are the sources of great evils no one will deny. For the frivolous and luxurious so-called duties of fashionable life, although exhausting and fatiguing, cannot be said to constitute that healthy exercise of mind or body which is desirable for young women to stave off disease and maintain sound health. Study and occupation, at the same time positive, useful, and attractive, are the best correctives of an imagination ardent and disordered, of a nervous system susceptible and hypersensitive. These considerations being made patent, many women, with the impulse characteristic of their sex, have rushed to the opposite extreme. They wish females to receive the same education as males, and to compete with them in the intellectual struggle for existence. We have, however, seen that both the woman's body and mind are inferior in vigor and power to those of the man, and, accordingly, if pitted against one another in a physical or mental race, she, to use a sporting phrase, would be heavily handicapped. She will not, as a rule, reach his standard, and, if she endeavors to do so, it will be at the expense of her health. The brain and nervous system, like other organs, if overworked, become the centers of activity, and are fatigued; this increases existing susceptibility, and hence arise symptoms of nervousness, hysteria, hypochondriasis, and insanity. These acting on the body produce emaciation and other diseases, the offspring of an exhausted constitution.

The conclusion, then, to be drawn from this section is that, in addition to the natural affectability of her character, this condition in woman is fostered and augmented by the artificial exigencies of civilized life; that, whereas idleness and want of occupation are the greatest sources of many diseases peculiar to the sex, the opposite extreme of mental strain is equally prejudicial.

We have endeavored, in the brief space allotted us, to point out the physical and intellectual capacities of woman, and in consequence the disposition and instincts which nature has implanted in her. This fundamental difference between the sexes, we have seen, is not due to education or special cultivation, but to a primary development of the system, each having those peculiarities best fitted for the part it has been born to fulfill. There can therefore be but little doubt that the most natural and healthy condition for a woman is a properly assorted marriage, in which she has children, with whom she has useful and congenial occupation, and by whom all her sympathies and best instincts are developed. In modern times great and laudable efforts are being made to effect an improvement in the higher education of women, and, as there are many who either from choice or circumstances cannot occupy that position which it is the pride of most to possess, a movement has been made whereby they may earn an independent livelihood by the exercise of their mental faculties. We are informed by energetic and doubtless well-meaning speakers from the platform, that women have hitherto been under subjection, that

they should emancipate themselves, that their intellect is as good as if not better than that of men, and that they are as capable as men are of the highest mental culture, and of profiting and distinguishing themselves thereby. It is unquestionable that suitable occupation and education are of the highest importance to the well-being of women, and that all due encouragement should be given to those who endeavor to provide for them an intelligent interest in life. But in avoiding Scylla care must be taken not to drift into Charybdis. To say that the majority of women are fit to cope successfully with men in the intellectual world would, we believe for the preceding reasons, be a most injurious doctrine, and lead to disastrous results. Our text, the pupil-teacher, is an example. A young girl, between the ages of fourteen and twenty-one, the most anxious and important period in her whole life, when her mental and physical constitution is undergoing development, is put under a severe intellectual strain. She is irritated and worried all day by teaching children, she is fatigued by hard study, and is rendered constantly anxious by the frequently recurring examinations on which her reputation, and it may be her living, depends. Such a career does not as a rule break down the young man, but in a large number of cases it completely unbalances the woman. She, in fact, is compelled to perform the work of a man without having his organic basis to depend on, and hence, as a consequence, her entire system suffers. So it is with women who follow other pursuits requiring severe mental application; they age before their time and finally succumb. It is true that men occasionally give way under the same ordeal, but these are comparatively the exception, and this is as often brought about by the assistance of other circumstances as by work alone. It is also a fact that there are some women who, overcoming all difficulties, have fully acquitted themselves of the highest mental exertions without injury, thus proving themselves to be of masculine capacity. Whether for these the church, the bar, and physics are to throw open their arms, I leave for others to decide; but that the majority of the sex would be benefited by a systematic encouragement to follow learned professions and other laborious callings, would be, we think, physiologically and practically an error.

How unmarried women who require to earn their living are to do so by the exercise of their intellectual faculties, is one of the great problems of the day, and by far too extensive a subject to discuss at present. Our aim has been to point out that in controversies on the question the medical aspect of the case is frequently lost sight of, and it is forgotten that, in the competition for life, woman is the weaker vessel, and liable to be broken when too roughly handled. Sage philosophers may speculate what ages may effect by evolution, but, taking woman as we find her, we believe that her welfare is to be consulted, not by encouraging her to take an independent position in life and by fostering a contempt for marriage, which is now the professed tendency of the strong-minded young lady, but by educating her in such a judicious and sensible manner as will make her a good wife, mother, and useful member of society, which is unfortunately not the inclination of the present age. If this were more systematically carried out, there would be fewer single women under the necessity of working for their own living; the outcry in behalf of these unappropriated blessings would be modified, and on entering the marriage state, which is the happiest as well as the healthiest condition, they would place themselves in the position that it is intended by nature they should occupy.

"... Seeing either sex alone
Is half itself, and in true marriage lies
Nor equal, nor unequal; each fulfills
Defect in each, and always thought in thought,
Purpose in purpose, will in will, they grow,
The single pure and perfect animal,
The two-celled heart beating with one full stroke
Life."
—Sanitary Record.

ASPHYXIA.—A "SPEEDY METHOD."

By HARVEY L. BYRD, M.D., etc., Baltimore, Md.

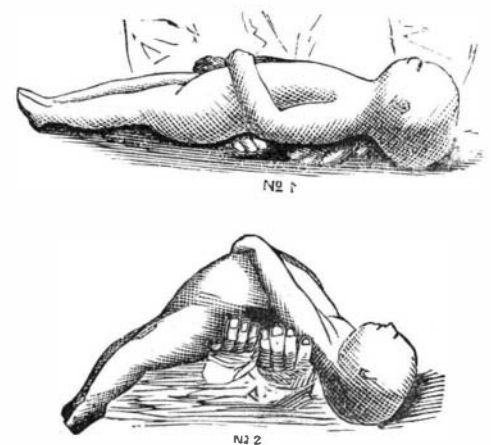
It is hardly necessary in an article like this to urge professional attention to the vast importance, in a medico-legal point of view, of establishing, even for a moment or two, the vitally necessary function of respiration in the newly-born infant. And whether a child be considered a "living soul" or not ere breathing occurs, all will agree that humanity calls loudly for prompt and efficient action at the hand of the officiating accoucheur for the development of the respiratory process in all cases where children emerge into the world in an asphyxiated condition.

Asphyxia is liable to be produced by a variety of causes; and every abnormal state or unusual circumstance occurring during labor likely to result in this critical and dangerous condition to the infant, should be carefully weighed by the attending obstetrician, so as to be prepared to promptly meet the emergency, should it arise.

On the announcement to the profession of Dr. Marshall Hall's "ready method" in asphyxia, some years ago, and its practical application in a few cases, the writer thought there was very little, if any, further addition necessary to the list of remedial agents in the asphyxia of newly-born infants. Later experience, however, with this and subsequently published "methods," proved that, occasionally at least, all the then known appliances were futile, and further knowledge required to secure success in the management of this very dangerous condition of the infant.

The following "method," it is believed, will be found a highly valuable, if not the most important, addition to our list of appliances in the asphyxia of children, and also for the relief of that condition in the adult when properly manipulated. The procedure is easy of accomplishment, and requires no preliminary arrangement or preparation for its application, but may be put into execution the moment the condition of the child may demand it. It is as follows: Bring the *ulnar* sides of the hands near together, with the palmar surfaces looking vertically, and place them beneath the back of the infant, so that the extended thumbs may aid, as far as possible, in sustaining the vertex and inferior extremities; then, keeping the *ulnar borders* near together, so as to form a fulcrum, the radial borders or sides are simultaneously depressed to as great extent as practical—say forty-five degrees—below the horizontal line, and then gradually pronated or elevated to as many degrees above that line, thus facilitating the escape of air drawn into the lungs during the downward movement of the head and chest. Or the hands are placed as at first, and passed beneath the body of the child—on its back—and the superior and inferior extremities furthest from the operator seized, one by each hand, near the trunk—the *ulnar borders* of the hands and wrists forming the fulcrum—the head of the child being kept at a proper axis with the movements of the chest by the hands of

an assistant; and the depression and elevation of the head and lower extremities proceeded with as already described. These alternate depressions and elevations of the two extremities, performed in a regular and gentle manner, and repeated at proper intervals, seldom fail in establishing respiration where it is possible of accomplishment. The occasional dashing of cold water on the epigastrium during the descent of the head and chest will hasten respiration where the first few movements fail in its establishment. It is important that the head be kept as far as practicable from too



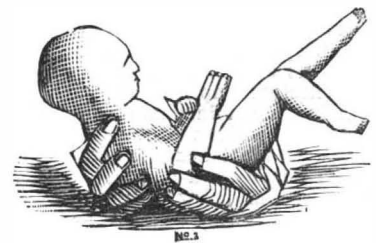
much lateral movement, and not permitted to depart considerably from its *antero-posterior* axis with the vertebral column during the continuance of the process. To this end, in a critical case, the hands of an assistant may be brought into requisition.

The importance of these remarks will be apparent to intelligent readers on a moment's reflection. No impediment should be permitted in the way of free entrance of air into the lungs during the downward movement of the head; and it is scarcely less important that no obstruction should oppose the escape of air during the upward movement of the head and chest.

The philosophy of the above-described movements will be easily comprehended by a glance at the accompanying woodcuts. A nurse or other intelligent attendant can be made to understand the movements, so as to continue them should the condition of the mother demand the attention of the accoucheur. These movements will apply to the treatment of asphyxiated persons of any age, as has been practically demonstrated in several cases since the publication of my first article on the subject.

Asphyxia from drowning has been promptly overcome in three instances since the question was asked in a former communication—on theoretical grounds—whether it would not act more promptly than any other method. It has been found that the "movements" are easily practiced when the body is taken from the water and placed on its back across a barrel, trunk of a fallen tree, or other substance. Two persons can thus depress and elevate the extremities as often as necessary to expand and exhaust the air in the lungs, as in normal respiration. The epiglottis acts in these movements in a manner similar to the valve of an ordinary bellows when being used.

Since my first article appeared—in 1870—on the value of the "speedy method," quite a number of cases of asphyxia have been treated by it, and its value thoroughly tested in my own practice, and in consultation with professional friends, and always with the most gratifying results.



Further experience has proven that where a sufficiently large tub or basin of warm water can be had, the movements already described may be carried more easily into operation than otherwise. Care should always be had, of course, to avoid depressing the head to such an extent as to permit the water to enter the mouth or nostrils of the child during the operation. In practicing the "method" in the water the head need not at any time be elevated above the surface—the body of the child alone being elevated or depressed—for the inflation and exhaustion of the air in and from the lungs. A number of cases could be recorded in favor of the method since the previous reports were made, but they are deemed unnecessary at this time.

The object of this communication is to give greater publicity to a most important remedial procedure, and we may here repeat what has already been proven to be true by many practitioners, "that those who may have occasion to employ this method will agree with us that in the asphyxia of children it is the remedy *par excellence*."—*The Practitioner*.

WASHING OUT THE STOMACH.—A CURE FOR DYSPEPSIA.*

THE patient is a man some fifty-five years of age, and by occupation a cardriver. He says that he has never been more than a moderate drinker. Two years ago he began to be dyspeptic, and lost his appetite. He found himself also obliged to urinate frequently at night. There was no dropsy apparent upon admission, but he vomited frequently, and was, in fact, one of those most unfortunate of beings, a wretched dyspeptic. His tongue was thickly coated, and his urine alkaline and phosphatic, but free from albumen and sugar. The abdomen was distended, and the epigastrium tender. He was, in other words, flatulent and constipated, with symptoms of marked organic dyspepsia.

We kept him in bed for a time and gave him complete rest, and set ourselves at work to find out the cause of his

* A clinical lecture, delivered at the Pennsylvania Hospital, Philadelphia, by J. M. Da Costa, M.D., Professor of the Theory and Practice of Medicine, and of Clinical Medicine in Jefferson Medical College.