

Crochet needles are most useful for lifting stitches out of a sinus. Knitting needles find another purpose as a means of rupturing the membranes when this is needed in obstetrical work. Sharp and blunt retractors may be fashioned, in an emergency, by bending the tines of a fork and the handle of a spoon, respectively. A teaspoon is also useful as an elevator of the eye, when resection of the superior maxilla is performed. An inverted tea strainer is useful in the dressing after colostomy, to prevent pressure of the gauze upon the gut. A spoon-shaped potato cutter may be used, in an emergency, as a wound curette. Similarly, applicators, probes, and depressors may be improvised by twisting stout copper wire. The multiple surgical uses of the hair pin are also well known. Of stouter material, if necessary, a small self-retaining speculum can be quickly made from steel wire; it often obviates the need of an assistant when searching the hand or foot for a foreign body. A wedge of hard wood makes a gag quite useful, often, when administering anæsthesia. A discarded thermometer case (or a hard rubber douche point) is a serviceable handle in which to mount, with candle grease or adhesive plaster, a stick of silver nitrate. Steel spring tape measures are better than the wires generally sold for the purpose, for conducting to an X-ray tube the current from the coil or static machine; easily kept taut, and quickly adjusted, they are safest for the patient and most convenient for the operator; that they are not insulated is inconsequential—the coverings on the regular wires do not insulate the induced current. Cheap powder blowers, such as are used for insecticides, may be employed as insufflators in surgical work, and pepper boxes are useful for dusting powders. Wooden skewers are serviceable nail cleaners. Rolling pins and kitchen towel racks are very convenient for adhesive plaster, rubber tissue, etc., especially for hospital dressings. Grocers' bags are the most serviceable receptacles for soiled dressings. Tar paper is a smooth, fairly waterproof material to tack on the floor when preparing a room for operation."

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UNION OF SEVERED NOSE.—The *Medical Record* notices an interesting case recorded in the *British Medical Journal*. A young woman lost the tip of her nose in a bicycle accident. The portion, measuring about three quarters of an inch from side to side, half an inch vertically and less than an eighth of an inch in thickness, and containing little cartilage, was picked up, placed in warm water for a few minutes, washed in lysol 1-40 and secured in position by four catgut stitches. The wound was painted with compound tincture of benzoin and a few

shreds of cotton wool saturated with this liquid applied. The patient was kept in bed about ten days and the wound healed by first intention.

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THE EVILS OF EXCLUSIVE MILK DIETS IN CERTAIN FORMS OF INFANTILE DIARRHŒA.—The *New York Medical Journal* says: "Carre- tier, quoted in *Repertoire de therapeutique*, recently submitted a thesis to the Faculty of Bordeaux, in which he maintained the following propositions: Milk, which is the food of choice for infants who are in perfect health during the first eight months of life, may be a cause of fatal digestive troubles, when given to infants suffering from diarrhœal diseases. Beginning with the eighth month, milk can be well borne as late as the sixteenth month, but weaning is often begun at the eighth month by adding other articles of food. An exclusive milk feeding administered in the course of the second year, or a too great quantity of milk given together with semisolid food, may produce a rebellious dyspepsia, which will not cease, save after a change of the diet to a farinaceous or leguminous food. This dyspepsia at times does not disappear until the milk is entirely banished from the dietary and is replaced by water in the preparation of the foods given to the infant. Some dyspepsias at the end of the first period of infancy, and at the beginning of the second period (that is, after the eighth month), are aggravated by a milk diet. In such cases of course the change of food recommended above should be also adopted.

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THE ICE BAG IN THE PRECORDIAL REGION FOR REDUCING TEMPERATURE.—The *New York Medical Journal* says: "M. Leduc advocates (*L' Union Médicale de Canada*, from *Revue de therapeutique*) the prolonged application of the ice bag to the precordium in the treatment of fever. He considers it an efficient substitute for the cold bath in some cases. The ice bag is separated from the skin by one or more layers of flannel, and is kept in place by a roller bandage. Caution is advised against removal of the cold application, which should remain in place until the temperature has remained for several days at the normal. One peculiar effect observed was that the action of antipyretic agents was notably increased by the ice bag."

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RAW MEAT ALIMENTATION IN TUBERCULOSIS.—The *Medical Record*, quoting from the *Lancet*, says: "R. W. Philip records the results of a series of observations. He found that the exhibition of raw meat was