

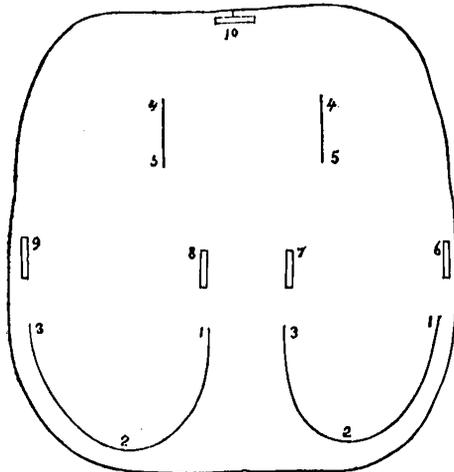
1868, of heart disease associated, as is so often the case, with rheumatism of an inflammatory kind, from both of which diseases the patient, a young lady of this city, had suffered more or less severely every winter. She began to drink the water last spring, and after using it for a period not stated, "her rheumatism seemed to give way and her general health to improve, and since then she has scarcely felt the slightest pain, is now stronger, and can endure more fatigue than at any time during the last two or three years."

The ordinary quantity drank is half a tumblerful, or a gill, three times a day, to be increased according to the nature of the case, under the advice of a physician.

TREATMENT OF CLUB-FEET.

By TRUMAN H. SQUIRE, M.D., Elmira, N. Y.

In the management of club-feet it is important that the treatment should be effectually continued while the patient is asleep. A *night-shoe*, which I have devised, and made use of in several cases, this season, is so simple and so perfect that I have thought best to make an explanation of it for the benefit of others.



It is made of tin, stiffened by a wire running around the circumference, and a couple of wires running across the middle of it on the under side. Two semicircular pins of tin, 1, 2, 3, to secure the two heels, are soldered in the position shown above. A couple of barriers of tin, 4, 5, rising in height about two inches, and properly braced, are so placed as to keep the toes apart. A strap of white harness leather, about an inch wide, comes up through the slot 6, goes

over the right foot, down through the slot 7, up through the slot 8, over the left foot, down through the slot 9, and is buckled firmly on the under side, by which means both feet are secured in position. An additional strap passes in front of each ankle, and is secured to the anterior edges of the heel pieces. When it is desired to keep gradual tension on the tendons Achillis, an artificial muscle* may take its origin from a band just below the knee, to be inserted at the toe of the shoe, 10. A child will gradually get accustomed to this apparatus, and will wear it all night, without being disturbed in its sleep.

Any one having occasion to treat troublesome cases of club-feet will find this *night shoe* a valuable accompaniment to the other means of cure.

It is sometimes difficult effectually to prevent the toes from turning *inwards* while the child is walking in the daytime. I obviate this tendency by stretching a little dog-chain, about six inches long, between the two heels. By preventing the heels from turning *outward* I keep the toes from turning *inward*. With this fetter, the child is obliged to take very short steps.

Any tinman, having the child before him, can make the shoe which I have described, at an expense of seventy-five cents.

Hospital Reports.

BOSTON CITY HOSPITAL.

Reported by J. H. McCOLLUM, House Surgeon.

Cancerous Disease of the Neck, and Infiltration of the Pneumogastric Nerve. Service of Dr. CHEEVER.—J. P. M., aged 60. The patient was admitted to the hospital on the 11th of August, 1868. He stated that, three months ago, without any known cause, he experienced prostration, loss of appetite and general *malaise*; since then, he has been gradually growing weaker and more emaciated, and now he is confined to his bed most of the time. Previous to this time the patient had enjoyed very good health, and has no hereditary predisposition to disease that he is aware of. Two months ago, a small tumor, about the size

* An artificial muscle is a piece of India-rubber tubing, about three inches long, with a strong cord—tendon—attached to either end of it. To make this artificial muscle, tie a large knot in the end of the cord—tendon—slip the knot into the calibre of the tube—muscle—then ligate the end of the tube, to prevent the knot from being drawn out.