

## FEEDING CHILDREN.

BY A RETIRED GALACTANERE.

Do you always manage to get one cow's milk? Do you always succeed in finding a wet nurse? Is Liebig's food a good thing, or is it Big-lie's food? What do you think of groats, and barley, and whey? I always put the children on one or the other, in spite of the doctor. What does *he* know about babies? My baby began to eat baked beans before it had teeth. Mine always goes to the table, and if you could only see it crowd in the potato and cranberry sauce!

Well, the tough ones live. Sometimes they grow up tough, and then again they don't. So I have thought, when I have listened to statements and questions as above. Now, my dear sir, since you have asked my opinion about the one-cow's milk, and since I have retired from the trade and it can't hurt me; and considering that everyone's *own* milk man is *the* honest one (just as in your business every one's *own* doctor is the best), I'll give you a specimen of how we used to do it, when milk was five cents a quart.

We used to call it morning's milk. That was because we left it for customers in the morning, and part of it was milked in the morning—of the day before. I started for the city, in summer, at about two o'clock. After my man had got up and milked our two cows, and had eaten his breakfast, he harnessed up the other horse and wagon, and drove round for the milk, which was to be fresh to-morrow morning. Mr. A. let us have a gallon or two; Mr. B. a quart or two. Mrs. X. didn't make butter that year, and Mrs. Y. had stopped cheese making, and they had four or five gallons apiece. So on through the town. He picked up a pretty lot in all, and every week I paid for it—nine cents a gallon. This was by the beer measure, so called, and each gallon held two hundred and eighty-two cubic inches. We sold it for five cents a quart. This was by wine measure, and each gallon held two hundred and thirty-one cubic inches. We must live, you know.

The man got home at about the same time that I did. We scalded out the cans I had brought home, and put the others in a cool place for to-morrow. There they stood till evening, some ten or eleven hours, when, as I had certain customers who were willing to pay twenty cents a quart for cream, and a man must live, we poured off about two quarts from the top of each can. Well, that's cream.

But there are meddlesome fellows, females most of them, who would say your cans have too much room in them, and the milk shakes about and it gets spoiled. A couple of quarts of water to take the place of the cream rectifies that. But some other meddlesome fellow may put a lactometer in it and find it don't weigh enough. Oh, a little common salt fixes that. But the color is too blue. We may be accused of selling skim-milk. True, I forgot that. Molasses brings back the color, gives it richness in look, and, with the salt, its flavor is all right.

I was one of the honest milkmen, and if there was a little cheating, a man must live, you know. Faxon never heard of any one's suspecting me; if he did, he never could prove anything, and never told me anything about it.

I knew one doctor whose boy was brought up on one cow's milk at an extra price. *That* of course, for it is very hard to keep milk from mixing. The doctor bought his own cans, and the boy grew astonishingly well, and the milk man got two cents extra on the quart for *that* milk. Once or twice the doctor watched, and saw the dealer mix the milk, round the corner. He afterwards found out that all of this man's supply came from the Westboro' Milk Company. But then a man must live, and wasn't the milkman a church member?

*Moral.*—Don't ask too many questions, and don't employ a milkman who makes loud professions of piety.

## HYDRATE OF CHLORAL IN CHOREA HYSTERICA.

By Dr. A. BRIESS, of the General Hospital in Vienna.  
Translated from the Wiener Medizinische Presse, by  
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In spite of the numerous experiments which have been made with this new remedy, it is certain that we are not yet in full possession of the evidence requisite to a final verdict upon its merits. No doubt, the future will settle for us the exact indications for its use, as the past has done in the case of so many other well-known remedies. Drasche believes that as an anæsthetic it will scarcely attain the importance of chloroform; and Benedikt warns us against giving large doses in affections of the brain, lest congestion and cerebral hæmorrhage may (possibly) result from its action. Liebreich considers that its range does not require so much limitation. He gives it even to small children, when cerebral congestion excludes

the use of morphine; employs it during minor operations upon the extremities, and in ophthalmic surgery, and considers that there is no objection to extending its use to severe operations, in case a suspension of the narcosis be not absolutely required. According to Bouchut, it must not be given to persons who have a cerebral or a cardiac disease. Many make a more extended use of it, especially in mental diseases, and with good results. Levinstein found it of the greatest benefit in cases of extraordinary dyspnoea dependent upon disease of the heart and lungs. He names, as the only circumstances prohibitory of its use, gastric disturbances, and ulcerations of the fauces, œsophagus, stomach, posterior wall of the larynx, &c.

While the views of different observers are so contradictory, and the price of the drug is so high, it will be hard for it to find universal acceptance in practice.\* But there are cases in which nothing ought to deter the physician from accepting the remedy with gladness, in the hope of securing some alleviation of the symptoms present. Such a case has lately come under our observation; and we now propose to relate it *in extenso*, in an entirely objective form, leaving inferences to our readers.

The following is the history, as chronicled by myself, conjointly with my colleague, Dr. Hesky, the second assistant physician in this department.

On the 22d of November, 1869, the patient, M. M., aged 22, was brought into the ward on a stretcher, to which she was held down by the aid of five men and several women. Even this large escort was not able to lay her quietly in bed. She jerked her body upwards, and to both sides, with such violence that the pillows were soon in the middle of the floor, and the freshly-made bed was in the utmost possible disorder. It was necessary to apply the "girts," to keep her from throwing herself out of bed. The muscles of the face, trunk and extremities were constantly twitching; the motions of throwing, jerking, extension, flexion, pronation and supination, were not even moderated for so long as a minute at once.

The patient's health is said to have been always good. Menses commenced in the 15th year, always lasted about a week, were tolerably abundant, and were neither preceded nor accompanied by any unpleasant symptom whatever. They are said to have appeared for the last time three months

ago. Six weeks ago she married. On the wedding-day her step-mother says that she noticed the girl making some convulsive movements with her hands about her apron, while standing before the altar. She had never been observed to make such motions before. A few days previously, however, she had been very much elated in spirits at the prospect of marriage, and this fact was supposed to have some connection with the twitching of the hands. Three weeks before admission, the whole body became similarly affected to a very slight degree. During the last eleven days the motions had increased very much. A white powder, given by a so-called "bather," had only made matters worse. During these eleven days she took no nourishment except soup and water, nor did she once close her eyes in sleep, so that her husband and friends, unable to endure the fatigue of watching her, brought her at last to the hospital. The husband informed us that they had had sexual commerce for several weeks previous to marriage, but never to excess, and that he had never perceived anything remarkable in her conduct during or after the act.

After careful and continued observation we were able to analyze the patient's movements into distinct actions, as follows:—

The head is most frequently thrown backwards, sometimes to the right or left, and rarely forwards. The forehead is often wrinkled, the eyelids are sometimes opened forcibly, and sometimes quickly closed. The eyeballs roll constantly.

The pupils are uniform, rather contracted, and react well to light. *Alæ nasi* very widely dilated; snuffing very frequent. The mouth is often opened to its greatest extent, and then shut so suddenly and violently that the teeth strike each other. The tongue is literally jerked out instantaneously, pointing generally to the left; then it is suddenly drawn back with a single motion. It has a whitish coat, and is moist; the lips are dry and fissured, causing the patient great discomfort. She often tries to reach them with her hands, but before accomplishing her wish she has to go through a long series of apparently aimless movements, throwing and twisting her body hither and thither, in and out. The extremities are in continuous action; the movements of various kinds cannot be followed by the eye. One foot, for instance, is thrown outwards against a board placed by her, while the other is drawn up and down, or kicks in the air. A similar, and yet more complicated play is carried on by

\* Since this was written, the price has fallen to about two-fifths of the price named; and it is to be hoped that the objection on this score will soon be done away with.

the hands. The whole body suddenly assumes this extreme degree of pronation or supination, threatening to fall out of bed in spite of the strong bandages; and cover-lids, mattresses, and everything not firmly fastened, fly about in disorder. The ordinary apparatus for confining unruly patients, and those with delirium tremens, is not sufficient; the girl's movements are so continuous and so violent that she tears the girts, and injures herself by rubbing against the rougher portions. A sheet is folded broad and laid over the legs, then passed under the bed and tied there; a second and a third are similarly applied over the chest and abdomen, while smaller pieces of cloth, fastened to the sheets, confine the hands and feet near together in the middle of the bed. Finally, every projecting bit of wood has to be padded in order to prevent severe contusions.

The patient's body is pretty well nourished; the breasts are firm, without milk; abdomen rather soft, not distended, not painful; some gurgling in the latter. Temperature slightly raised, pulse hard to count, 100-108. Respiration cannot be seen or counted. Violent sobbing at times. Consciousness not obscured. The patient sometimes makes herself understood, though with difficulty; she complains of great thirst, and when the movements are violent she asks to be bound faster. When she attempts to execute any voluntary motion, the greatest variety of counter-motions first come into play, and finally the purposed movement is quickly and hastily accomplished. The urine is passed in bed. Pressure upon the vertebral column calls forth no expression of pain. Nothing solid can be swallowed, and even water has to be carefully introduced by means of a rubber teat. Swallowing is difficult; and when a little too much water is introduced at once, she chokes badly before she can force it down.

At 4½, P.M., about half a grain of acetate of morphine was injected. In fifteen minutes she slept; but awoke in about half an hour, and the movements became much more violent than before. At 9, P.M., a second injection was made, with the same quantity of morphine, which was followed by an unquiet sleep of nearly an hour; and on awaking, the restlessness again became so great that the patients were kept awake and in a state of great excitement all night. As the patient could obtain no rest, and was constantly losing strength, being unable to swallow scarcely anything but water; as the excoriations were continually in-

creasing, and threatened to suppurate and thereby to expose her to the danger of pyæmia; as the patients in the ward were all unable to sleep, and besieged us with complaints, while many of them experienced various convulsive contractions, and one woman who had had epilepsy four years previously was in dread of a fresh attack: for these reasons we decided without delay to have recourse to the hydrate of chloral, hoping at least for some calming effect, and on the 23d of November, at 10, A.M., we gave her one-half of the following:—

*R.* Chloral. hydratis, drachmam unam.

Syr. simpl., aq. dest., aa. unc. semis.

Care was taken that none was spilled in swallowing. In *three minutes*, the movements were less violent. In *eight minutes there was perfect quiet*. The head was somewhat inclined backwards, the eyes and mouth were half open, the face rather cyanotic, the respiration deep, regular, 18 or 20 in the minute, the pulse, felt in the radialis and seen in the carotis, 92, the temperature somewhat elevated, the skin moderately damp, the sensibility normal.

In ten minutes, a slight twitching of the extremities occurred, owing to the noise made by a stick of wood falling in the kitchen; then again perfect quiet. After twenty minutes, respiration 18, pulse 88. In thirty minutes, twitchings during two seconds, while another patient was coughing violently; the tongue was thrust out, the head slightly moved, and then sleep returned, the eyelids being more nearly closed. In thirty-five minutes she awoke, and began to be restless, with slight intervals of quiet; and presently the jactitation was general and most violent, while the urine was passed in bed. After quarter of an hour, the restlessness continuing, one-half of the remainder of the medicine, or about 15 grains, was given in small portions at a time. In four minutes sleep followed, which lasted uninterrupted for half an hour; then slight twitchings during five minutes, sleep for ten minutes, violent jactations for five minutes, sleep for ten minutes, severe twitchings for an hour, and then sleep for three-quarters of an hour. Upon waking, the restlessness was very great, and the remainder of the chloral (15 gr.) was given. During ten minutes the patient called frequently for water; and then slept. Temp. raised considerably, resp. 18, pulse 80. The bleeding excoriations on the back and limbs were washed and dressed. In thirty-five minutes, a few seconds of slight twitching; then ten minutes of calm sleep,

then some twitchings, fifteen minutes of quiet sleep, ten minutes of moderate jactation, an hour of sleep with few interruptions, and finally very violent twitchings and movements, and loud, inarticulate crying. At 5, P.M., another half-drachm was given, and during the remainder of the time until the next morning the patient alternated between quiet sleep and moderate convulsive disturbances, sleeping, however, the greater part of the time. Drank four tumblers of water during the night. Pulse 72, resp. 12.

Nov. 24th.—Frequent and urgent requests for water. Great unrest, with little sleep. At 9¼ half-a-drachm of chloral was given at once. Sleep followed in four minutes, which lasted with very brief interruptions three or four hours. In the afternoon, almost three-quarters of an hour of nearly perfect quiet, while the patient was awake. She spoke quite intelligibly and connectedly. Great restlessness for fifteen minutes about 5, P. M. Ate ten plums, and drank some milk, and then rested till 7. From that time until 9¼, there were several very disturbed periods. At that time she was given a third of the following:—

℞. Chloral. hydratis, drachmam,  
Mucil. gum. arab.,  
Syr. cort. aurant., an. unc. sem.

This mixture seems to have been very repulsive to the patient, who could not be made to drink the whole dose. Slept a good deal, and had also a good deal of disturbance, during the night.

Nov. 25th.—From 10, A.M. to 4, P.M., awake, with very slight disturbance. Took milk and soup. Urine drawn with catheter. Slept very well on the night following, waking only four times, with very slight twitchings.

Nov. 26th.—The fetters are taken off. Thirst much less troublesome. Says she is hungry. Swallowing is still difficult. Speaks distinctly. No stool as yet. Urine drawn with catheter.

Nov. 27th.—The patient is quiet for the most part, and speaks some connected sentences. The twitchings are now only local. Her hand jerks when she grasps an object, but she can take the glass and drink from it. The muscles of the face sometimes twitch while the trunk and extremities are quiet.

Nov. 28th.—Status idem. Three large stools, the effect of a laxative medicine.

Dec. 1st.—The patient leaves her bed; her appetite is excellent. She speaks quite fluently, and makes very few noticeable motions, mostly with the upper extremi-

ties. The head is seldom thrown to one side or the other. Refuses a dose of ½ drachm bromide of potassium.

Dec. 4th.—Can eat solid food without any assistance, and goes about all day. Accompanied by another patient, she descends one flight of stairs and crosses several court-yards, on her way to the bath.

Dec. 5th.—Feels worse after the warm bath.

Dec. 6th.—Flor. zinc., a knife-point full, three times a day.

Dec. 9th.—Condition the same. A cold douche-bath was not agreeable to her.

No treatment since the use of chloral had appeared to be followed by any improvement, but, on the contrary, the twitchings had become worse. A scruple of hydrate of chloral was therefore given night and morning. After taking it the patient became much quieter, without going to sleep; her speech was quite clear and distinct, her head never affected; the chloral burnt her mouth somewhat, but though she disliked it she took it readily.

An examination showed that the vaginal portion of the uterus was in a virgin condition, and the whole organ very little enlarged, not at all answering to her supposition of a three months' pregnancy. Breasts firm, and without milk. Vagina not particularly hot. Fundus and os both distinctly inclined forwards (anteflexion).

Hydrate of chloral was given for three days in the above dose (Ḑi., morning and evening). The muscles have become very much quieter. The patient feels not the slightest bad effect from the continued use of the drug; never is put to sleep by the dose of a scruple. Appetite normal.

Dec. 14th.—A little debility remains. She had grown very lean and very pale, but is now strong again, and eats all kinds of food with a good appetite, goes about all day and makes herself useful in the ward in all kinds of ways. Takes 10 drops of tr. valerian twice a day. Peculiar movements can hardly be perceived; and on Dec. 23d, she was discharged, cured.

DR. NOTT, in an article on the treatment of endometritis by uterine injections, says that it is the only treatment in which he has any faith, that it is not attended with danger, if properly managed, and that the objection urged against the treatment arises "1st. In want of a proper instrument for injecting the body of the uterus. 2d. From articles too irritating to suit the condition of the organ."—*California Med. Gazette.*