come in the least unpleasant or offensive, intra-uterine injections should be employed. Ergot and cinchona may be administered, with advantage, in most cases.

The administration of ergot is not an unmixed blessing. Where uterine action has already set in, ergot intensifies this action unquestionably; but if only a portion of the ovum be expelled, ergot tends to produce such an amount of contraction of the cervix uteri as to preclude further attempts at removal of the remainder. We may have to wait several hours until the influence of the ergot has passed off, before being able to insert the fingers or forceps to complete the delivery of the placenta. If hæmorrhage be severe, ergot is, of course, indicated, and must be given; but, when the hæmorrhage has ceased, it may be well to refrain from further administration of the drug until complete removal of the placenta has been effected, when its employment may again be persisted in. Where we have reason to believe that the whole of the placenta has not been expelled, and the hæmorrhage continues, or recurs on the least exertion, and ergot fails in enabling the uterus to throw off the retained portion, its employment should be discontinued, and proper means adopted to extract the remainder of the placenta.

I have seen instances where ergot had been given freely and continuously for several successive weeks or months, without the desired effect being produced. This illustrates the abuse, not the rational use, of the drug, and cannot be too strongly condemned.

It is with the hope of directing special attention to the absolute necessity of removing all placental debris, in these cases of incomplete abortion, that I have thought it worth while to occupy your time and attention on this occasion, and if I have succeeded in this, my object will have been fulfilled.

BATH AND AIX-LES-BAINS.

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RETURNING the other day, with a patient, from Aix-les-Bains, I came across a leading article on Balneology, in a recent number of our JOURNAL, and my attention was arrested by the following passage.

"England possesses several springs of undoubted value, but, for some reason or other, they are less highly esteemed than water from foreign sources."

It struck me that, with regard to Bath, the reason was the bad system of management that has hitherto prevailed there. Bath has not the beautiful climate of Aix-les-Bains, its high temperature, and permanent sunshine. The waters of Aix-les-Bains are more efficiently mineralised, very much more abundant, and of a higher temperature than those of Bath, and their natural high pressure facilitates douching. Nevertheless, of the two thousand English who went to Aix-les-Bains last season for gout, rheumatism, and neuralgia, one thousand might have been as well cured at Bath, if the same system was followed there as at Aix-les-Bains. After deriving benefit from Bath waters some twelve years ago, I did my best ("Why We Go to Foreign Watering Places," *Lancet*, October 24th, 1874) to urge the medical men to change the wretched system of administration that had been handed down to them, but without being successful. I hear, however, with pleasure, that at last there is a great improvement in the working of the Bath waters, that Aix-les-Bains is being imitated as far as possible; so I again venture to make a few remarks on both these remarkable watering places.

From time immemorial the summer has been the season for treatment at Aix-les-Bains, and although the temperature be high, and reliably so, still patients are ever reminded by medical men and attendants to avoid catching cold after the douches.

One of the most experienced practitioners at Aix, Dr. Macé, told me that when the weather turns chilly, he did not like to begin the use of hot vapour douches—douches Bertholet. Such being the case, what can be thought of, I hope I may say, the old plan of telling patients suffering from chronic gout, rheumatism, and neuralgia, to come to Bath in the autumn, when the cold, wet, and windy weather has set in? It should be now extensively and persistently advertised, by the proper authorities, that the Bath season for treatment begins in June, and continues during the months of July, August, and September.

Dr. Tunstall, who wrote a good book about Bath, incidentally mentions that the baths and douches did much more good to the inmates of the hospitals who went to bed immediately after taking baths or douches, than to the rich patients who dressed and went home as they liked. If, in the warm climate of Aix, patients are

carefully wrapped up in blankets and quickly taken home, and put to bed to sweat for an hour or so, with the aid of some warm drink, it is absolutely necessary to do the same in the uncertain climate of Bath; with gouty, rheumatic and neuralgic patients after they have been shampooed and douched at the baths. Aix-les-Bains belongs to the State; the buildings have been well planned, and on a handsome scale. The Bath waters belong to the corporation, have been managed by a committee of retired tradesmen, so the buildings are scattered, and their construction defective. About 1868 the corporation might have built a suitable establishment, but they preferred to let the land to a joint-stock hotel company, in one wing of which hotel, the corporation built a suite of baths at a cost of £12,000.

What I will call the bathing unit at Aix, consists of a large square lofty room fitted up with the requisite furniture for douching, etc. This room is entered on one side by two small closets, called dressing-rooms, placed side by side. A patient leaves his clothes in one dressing-room, and while he is being manipulated for twenty minutes, another is undressing in the adjoining room, and is ready to enter the bath-room as soon as it is vacant. The saving of time effected by this arrangement will be seen at once.

The Bath bathing unit, judging by the baths constructed by the corporation in the hotel I have spoken of, consists of a fine bathing-room, a large dressing-room, and a water-closet—a water-closet for every patient, as if the Bath water was more purgative than that of Carlsbad. Possibly, something can be done to rectify the defective construction of the buildings.

I was at Bath during the whole of August and part of September, 1874, for an indolent knee swelling, so I was at the Queen's baths every day for six weeks. There were not many bathers, but I certainly saw a dozen very bad cases of chronic gout and rheumatism, men that could with difficulty be got into the building. There was, however, no medical man to look after them; indeed, I never saw the face of a medical man at the Queen's baths during my six weeks' attendance.

At Aix-les-Bains, the medical men live at the Etablissement from 8 to 11 A.M. They see their patients as they come, move about in the passages to ascertain how they are getting on, so as to continue or modify the treatment. The Bath medical men should imitate this mode of practice, if they want to rival the success of Aix-les-Bains; doing their best that the bulk of the bathing may be done between the hours of 7 and 1 o'clock.

I have had to say so much in praise of Aix, that I trust its medical men will not mind my stating that they do not pay sufficient attention to the diet of their patients. There is this difficulty about the dieting of patients at a watering place: that they are in a minority, compared to relatives and friends that accompany them, and who require the best of living as they are in perfect health. It is customary at Aix to board at one of the many excellent hotels. The breakfast is tea or coffee, with bread and butter, and is governed by the time of the bath, which it should precede; lunch is at 12 o'clock, and dinner at 6 o'clock, and of the usual table d'hôte type.

With regard to the lunch, I will describe what I used to sit down to at the Hotel Château Durieux, a most comfortable hotel, with a first-rate cook. First came omelette, or eggs done up in some other way, then fish, boiled, fried, and sometimes a salmon *mayonnaise*. There followed two stews of mutton, veal, or chicken, with rich sauces and, lastly, broiled steak or cutlets. Cheese and strawberries concluded the repast. A gouty friend, who was stopping at the Europe, asked me whether this was the kind of food for a man who was undergoing an elaborate treatment for gout.

Some dozen acquaintances under different Aix medical men, for gout or rheumatism, assured me they had not been told what to choose out of the different dishes I have enumerated; and, at my hotel, I was amazed to see patients who described themselves as having been martyrs to gout, eat heartily of almost everything, both at lunch and at dinner. The previous shampooing and douching accounts for good appetite and better digestion; but I am convinced that this promiscuous high feeding greatly diminishes the amount of good that might follow the full treatment of chronic gout, rheumatism, and neuralgia at Aix-les-Bains.

To like to get the most for our money is a national characteristic; and, as the wine is included in the board, few order better wine. We used to sit down about 80 to meals at the Hotel Château Durieux, and only two or three ordered other wine. This is decidedly to the advantage of the patients I have had in view, provided they do not take too much of the wine, and take it mixed with water or Vals water; but I have seen patients, who for years had been suffering from gout, take more than a bottle a day of this second-rate decidedly acid *vin ordinaire*, day after day. Those who think of sending patients to Aix-les-Bains should carefully advise them as to diet and wine.