"vital spirits," "animal spirits," "natural spirits," and "subtile spirits." We have also the combinations of "air," "earth," "fire," and "water," mentioned, and their result in "smoke" from the lungs. "*Sanguis inspirato æri miscetur, et expiratione à fuligine repurgatur*," &c.; but, turn these expressions into "vital laws," "sensorial and organic life," "carbon," "oxygen," "caloric," "organic and inorganic nutrients," and the favourite modern expression of "*pulmonary combustion*," and you find that the latter are little more than repetitions of the former doctrines—plus a more minute analysis.

As to the instances that have occurred in the hospital, of paleness and other signs of renal degeneration, without the symptom of albuminuria, or to a very slight degree, I may merely cite:—*Firstly*, the case of Elizabeth Sleuth, who died in the extreme of pulmonary consumption, and whose kidneys were excessively pale and fatty. *Secondly*, of Sarah Binion, who died of carcinoma uteri and dropsy, and whose urine was only slightly albuminous towards the end, but who had the Flemish expression of countenance, in whom the kidneys were very pale, adherent to their fibrous coats, and covered with stelliform clusters of vessels on their surfaces. *Thirdly*, Henry Shaw, who died of cardiac obstruction and hypertrophy, with heavy puffy countenance, but no albumen, in whom the right kidney was puckered on its surface, underneath which puckered part was found a hardened mass, which grated under the knife, the whole being pale, and the middle-third exhibiting no glandular structure whatever. *Fourthly*, in Jeremiah Faulkner, who died of cerebral effusion, and who had an enormous tumour, like an over-grown thymus gland, in the anterior mediastinum, a degenerated hip-joint, and pale puffy countenance, but no albumen, in whom the right kidney, though congested, was pretty natural in general structure, but yet had a tubercle on its surface about the size of a pea, while the left was pale, and so degenerate as to exhibit no proper structure at all, and was rough and unequal on the surface. In all of these, except Sleuth, renal degeneration was diagnosed during life.

All these facts point to the conclusion which I would wish to enforce, viz., that degeneration of the kidney is similar to degeneration of the lung and other organs; and that, although the exciting causes may often be of a local nature, we are chiefly to look for the evidences of the malady in the general constitutional condition of the patient, and consequently apply our remedies to the part, certainly, but still more certainly, if the expression may be allowed, to the whole material and machinery of nutrition.

As to the other degenerations, simple or malignant, which overtake these organs, and the calculary deposits which take place in them under morbid conditions of the blood, these shall be best treated of when we come to consider the derangements of the blood, and the ganglionic innervation.

LECTURE ON THE DISEASES OF CHILDREN.

DELIVERED IN THE

Chatham Street School of Medicine, Manchester,

BY DR. MEREI,

Fellow of the Hungarian Academy, late Professor of the History of Medicine at the University of Pesth, Clinical Professor of the Diseases of Children, and Director of the Children's Hospital at Pesth; Fellow of the Imperial Society of Medicine at Vienna, etc.

LECTURE X.—(Concluded.)

Iodine; Mercury; Anthelmintics. External Remedies.

ATONIC diarrhoea, or that which we observe to come on after the disappearance of eczema of the scalp and face, is frequently benefitted by iodine.

There exists an infinite and unaccountable variety in the tolerance of this remedy in different children. I had many cases in which, at the age of two or three years, they took for a long time two scruples of iodide of potassium every day; more than that, however, will seldom be resisted at this age.

The best preparation is the *iodide of potassium*, pure iodine sometimes may be combined with it, for the sake of saving expense, or to act more strongly in some full and phlegmatic constitutions. In general, however, iodine is too irritating for children. The best mode of administering iodide of potassium will be in solution, prescribing two or three drachms to six ounces of distilled water, of which we commence by one or two teaspoonfuls three times a day, mixing each dose with water and sugar. The more water, the easier we convey large doses of the remedy, without causing great irritation of the eyes and the frontal sinuses.

I recommend you to administer two, three, or four doses, but all in the afternoon, thus the reaction will reach its height during the night, consequently in bed, by which circumstance the perspiration is promoted, and the child will be in the morning, and during the greater part of the day, in an easier state. Using this remedy duly in this powerful way, you will succeed in curing cases which have been already treated with it, by small doses, for a long time, and unsuccessfully.

In general you will observe, that all those children whose appetite soon increases after some doses of iodide of potassium, will bear a very effective course of it, whilst those whose appetite soon becomes lessened, in a short time will not bear even small doses.

There are three other salts of iodine, which I will only shortly mention:—

Bi-iodide of mercury, approaching in its action pure iodine, but insoluble, besides that in every respect it is not a remedy proper for children.

Iodide of mercury, approaching in its effects calomel, but less purging, less strong in its antisymphilitic effects, and less salivating, there is scarcely a reason to use it in children's practice.

Iodide of iron.—Iodine acts in a stimulant way upon the secretory functions, whilst iron obstructs. Iodide of iron I have observed to act simply as a martial remedy.

As to *anthelmintics*, children of tender age do not suffer from the *tape-worm*, which in all my practice I scarcely have encountered before the eighth year, even this being a rare case. I have not to speak, therefore, of the male fern, or of the pomegranate root, but to mention only those remedies which have appeared to me the best against the *ascaris vermicularis*, and *ascaris lumbricoides*.

The *ascaris vermicularis* (maw-worm) dwells in the rectum and the lower part of the large intestines, crowded in great numbers, most frequently proper to infancy and tender childhood. The remedies employed to remove them are almost in all countries the same; I will mention to you, however, injections of an infusion of red onion, mixed with some drops, or half a grain, of extract of aloes.

Ascaris lumbricoides is the worm that causes frequent and sometimes severe disturbances from the second year of age, its abode being the small intestine, and sometimes the stomach. I can recommend to you the following powder, which I have found most efficient in the complaint in question:—

R. Pulv. Sem. Santonici,
 „ „ Tanacet. utr., dr. ss.
 „ Rhei, gr. xij.
 „ Jalapæ, gr. viij.
 Sacch. Alb., scr. iv.

F. pulv., to be divided into six or twelve powders, according to the age of the child. From two to three powders every day.

If we are not mistaken in the diagnosis, after a course of four or five days with these powders the worms will come out; if we have been mistaken, which easily happens with this complaint, the above powders, united with a strong reduction of farinaceous food, at least will have exerted good effects upon that condition of the abdomen which resembled helminthiasis.

Mercury is less efficient as an anthelmintic than the above remedy, and should never be given repeatedly, unless there is clear and special reason for its use. If the constitution of the child, however, is strong, and you wish to increase the force of the medicine by the addition of calomel, then I advise you to do this only after you have given, during three or four days, the former powders, and to accomplish then the trial or cure by adding to the three or four last doses two or three grains of calomel to each.

External remedies.—The particular indications, mode of application, and effects of fomentations and poultices, offer no salient points in children's practice. Baths, injections, and sponging are too generally known to require any comment.

Though hydropathy, as a general system of therapeutics, is but an extravagance of the human mind, there is no doubt that some of its means and modes of treatment, in some cases, are good, and worthy of your confidence.

Above all I must bring under your notice the *local cold wrapping*, after the method of Priessnitz, -at Gräfenberg; it consists in dipping a proportional piece of linen into cold water, which, after being squeezed out, you put over or around the affected part, then you cover this carefully with another (much larger) dry cloth, so as to prevent the accession of air, as well as evaporation. After a couple of hours, or more, when you suppose or find that all has become dry and hot again, and that the application appears beneficial by its effects, you repeat the same as many times as necessary, even during weeks and months.

The effect of this application is, to subtract at first the superabundant caloric, and subsequently, when the linen has become warm, to serve as a local bath, and promote local perspiration on the affected part. The principal indication therefore is, intense dry heat of the affected part. Abscesses do not allow its use. In articular rheumatism and chronic inflammation of the joints I have found it highly beneficial in children's practice.

With regard to *cold sponging of the body*, I forgot before to mention to you that my experience is decidedly in favour of it, whenever, during the course of a fever, a long-persisting, tense, dry, hot skin, with great restlessness, is before you. Scarlatina, noted by these symptoms, far from excluding its use, finds in general in cold sponging, an incomparable assistance. It soothes the system and promotes perspiration. In typhus, I frequently mix the cold water to be used, with one fourth part of diluted muriatic acid. Counterindications are the inflammations of the organs of the chest.

Blisters and sinapisms are decidedly mischievous with young infants from about one to six weeks old, in particular with a very delicate skin. Febrile excitement will ensue or increase by their use.

If the case shows no symptoms of fever, and that the one or the other of those applications are indicated, the essential condition will be to weaken them, mixing the first with a quantity of diachylon, the second with linseed powder, proportionally to the age. For a child about three months old I never add less than five parts of diachylon to one part of cantharides blister. The same proportion is to be maintained in diluting the mustard poultices with linseed. I have seen ensue dangerous irritations of the bladder after strong and large blisters.

In these lectures I have not mentioned all remedies of which I have ever made use, but all those indeed, which I regard as important, as necessary or useful, and safe in children's practice.

[We are requested to make the following corrigenda in the first part of this lecture inserted in our last number:—Page 257, col. 1, twenty-one lines from the bottom, for "eight ounces of water," read "*three ounces*;" col. 2, second line from the top, for "*chlorosis anæmia*," read "*chlorotic anæmia*;" page 258, col. 2, sixteen lines from the bottom, for "as we perform them in Poth's Manual," read "as I have performed them in Poth's Manual."