

**DISEASES  
OF  
WOMEN AND CHILDREN**

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## Diseases of Women.

"Self-preservation is the first law 'of nature" in point of time only, for a second law, not less imperious, is race-preservation. " Life," it has been, said, " is a struggle to gratify two instincts-hunger and love." "

Among the lower beings, animals and plants, the maintenance of the individual and of the race is provided for by one and the same organism. The minute plant, the fungus familiar to us under the name of yeast, is a microscopic ball, which, placed under favourable conditions, not only maintains its own proper life, but also produces similar independent beings. On the surface of the original ball minute buds appear, grow, and finally are detached with the size, shape, and power of the parent organism. As we ascend the scale of life, however, we find special organs set aside in each animal and plant intended solely for the production of new and, similar beings.

In all the higher animals-man included-the development of the sexual organs, occur only after the development of those instincts essential to the preservation of the individual. The interval which elapses between the birth of the animal and the advent of its sexual life varies according to the term of the animal's natural life. The rabbit becomes sexually mature within a year after its birth; the elephant only after a score of years; the human animal after ten to fifteen years.

There are, therefore, no essential differences mental or moral-between the boy and the girl. After' na certain period of 12 to 18 years, the sexless becomes a sexual being, assuming traits, physical, mental and moral.

The angular awkwardness and innocent freedom of the girl are replaced by the rounded grace and conscious modesty of the woman; the boy is no longer a companion to be romped with, but an admirer to be enslaved.

If both man and woman differ physically from the child—he more than she—his skin is rough and hairy, hers smooth and hairless; his outline is angular, his shoulders broad, his hips narrow, his muscles strong, his bones large, his skull thick, his voice deep and harsh; her contour is rounded, her shoulders narrow, her hips broad, her skin thickly padded with fat, her voice smooth and childlike. Man's physical development fits him especially to maintain the struggle for existence; woman's whole physique is designed for the preservation of her race. Man is essentially strong and selfish—woman, weak and generous. In man is embodied the individual—in woman, the rare. In breathing, the child and the man employ largely the muscles of the abdomen; woman, on the contrary, breathes almost entirely with the chest, because the mutual performance of her sexual duties compels the use of her abdominal muscles for other purposes than that of breathing. Although man's shoulders are broader, yet his collar-bone is shorter than woman's. The latter, therefore, though lacking somewhat the strength and freedom of movement in the shoulder joint, can support a burden, as of a child, on the breast: with less fatigue than he,

The changing of the girl into the woman implies mental and moral, as well as physical growth. During the period of two or more years she is undergoing changes, and during this time the infant woman demands careful supervision, for during this period the girl is peculiarly susceptible to diseases of the flesh and perversions of the mind. She must be protected, not only from the ailments which inevitably arise from neglect to recognise the importance of the change at hand, but also from diseases which affect other parts of the body with especial frequency at just this time of life.

Among the physical ills is the manifestation of constitutional tendencies and of hereditary taints which have lain dormant since the birth of the girl.

Very often a delicate child of consumptive parents who has maintained fair health during previous years, fails when this increased demand is made upon it, and manifests the first pronounced symptoms of the parents' fatal malady. So, too, many other affections, the tendency to which was imparted with the parents' blood or acquired through their ignorance, attack the girl at this critical period, perhaps to overwhelm her at once, or at least to secure a foothold from which they can never be dislodged.

Then again there are certain ailments which seem to affect the children of robust and of delicate parents alike. The most serious physical ills originating at this period are those affecting primarily the organs undergoing development. Too often the foundations of many ills, such as painful or irregular menstruation in the girl, sterility in the wife, and invalidism in the mother, are laid. These ills may be traced to the over-zealous use and cultivation of other organs, but these can be remedied by regulating other functions of body and mind, and by sustaining the girl's strength by nourishing diet, warm, comfortable clothing, fresh air, early hours, with plenty of sleep and rest, thus securing a healthy normal menstruation. The body can rarely discharge two important duties well at the same time. To secure the best work from the brain we rest the muscles of the stomach. The best mental effort or literary and scientific work is not performed in the first hour after dinner: muscle work and stomach work must interfere with each other if attempted together. The digestion of a meal slows the muscles, the contraction of the muscles slows the digestion. So, too, the development of the girl's reproductive organs requires the circulation of large quantities of blood in these organs. Again, over-study and mental activity demand the circulation of large quantities of blood through the brain. The girl has not blood enough to perform both lines of work at the same time. Menstruation slows her brain—study slows her menstruation. It is at this time she needs complete rest of mind and body in order to assist Nature to develop the reproductive organs.

If imperfectly developed now they will be only patched for life. Blood must be allowed to flow to these organs even though the brain has not enough left to study with. At the same time, loose clothing, and comfortable corsets should be worn; high-heeled shoes avoided because of their tendency to tilt the pelvis and injure the spine. Special attention should be given to diet, avoiding starchy foods, pastries, sweetmeats, and sweets. Food should be plain and nutritious and taken at regular hours. The girl needs lots of sleep and fresh air, and the bowels and kidneys should be kept regular. The more robust and vigorous the individual, the less is the interference with the general health at the menstrual period. It is usually the weak, nervous, delicate women, and those accustomed to luxury and emotional excitement who are most subject to profuse and frequent menstrual discharges.

The three chief events in human life are birth, marriage, and death. The first and third are partly within human control; the second wholly so. Therefore the wise youth, whether boy or girl, will lay plans with a view to marriage and death-to promote the former and postpone the latter.

It is reasonable that youth should have its full share of pleasure, but it is not right and reasonable that pleasure should be carried to such an extreme as to hide the other great truth-that youth is also the time of preparation for the responsibilities of life. Its opportunities neglected can never be recovered without the severest effort. Generally speaking, they are beyond recovery, as many grown men and women know to their sorrow.

"Every day is Judgment Day," said Emerson. Every young man and young woman should think of this during the long, bright days of youth, when life seems to flow so smoothly and all the future seems to be had for the taking. Now is the time for youth to decide its future, when it is forming the habits which shall serve as stepping-stones, leading to honour and achievement, or to failure with respect to parenthood.

The choice of a companion has more to do with happiness and success than is usually considered.

Marriage is a school to itself, as life is a school, yet few men and women know each other until the intimacy of wedded life begins. They both should be morally, physically, and mentally strong and healthy in order to become parents. The evolution of perfection of the human race is in the hands of parents.

Parents frequently live again in their children, for the children resemble them, not merely in countenance and in body, but in the general features of their minds and in their virtues and vices. At the moment of impregnation both parties must, to some extent; transmit their qualities to their offspring. While the child is in the mother's womb it is liable to be affected favourably or injuriously by all the causes which affect her. If she is disordered or defective in her vital functions- namely, in digestion, respiration, circulation, excretion, &c.-its vital functions must suffer. Gross food may render it scrofulous, and sedentary habits may cause its muscles to be weak and flabby. If she does not respire sufficiently it will be puny and bloodless; if she is drugged it will be of bad habit; if she is mercurialised or antimoniated it will have a predisposition to tuberculosis and consumption; if she is dosed with quinine it will be defective in the external senses, especially hearing and seeing; if she takes preparations of iron freely its whole nervous system will be shattered. So, too, with the mental influences-a fit of passion, a frightful narrative, an unhappy home, an unkind husband, &c., are each and all causes of abnormal conditions. From the moment of conception until birth, the influences on the mother are constant. Here again, I repeat, it is important to keep the mother healthy, comfortable, and happy, that the children may be healthy.

At least nine tenths of women suffer from some form of female complaint. This part of the body, being so highly sensitive to good and bad conditions, becomes impaired. Every violation of the laws of health, every injury to any organ must entail mischief and disorder upon the reproductive system. It suffers, above all, from the irregular or excessive action of its own organism.

The organs of generation are intimately connected with other organs, and a diseased condition of one affects others, and in turn, the whole body suffers. The reproductive system is super-abundantly supplied with blood-vessels. Any condition that calls for an undue amount of blood to the parts cannot be of long standing without developing some degree of inflammation which varies according to the cause, and must be treated according to the conditions. Herbs will cure by assisting nature, and are, therefore, the most successful treatment.

Women submit themselves for treatment to educated men, holding credentials of proficiency in medicine. On investigation they order an operation, probably somewhat encouraged by the medical profession, which is not only abused, but criminal in its nature. A fee is collected and frequent repetitions of this treatment are recommended, resulting in chronic' invalidism. I speak plainly upon this subject because I have had large experience. Hundreds of cases have been brought to my knowledge where women have been needlessly subjected to painful operations, only to be mutilated for life and left in a far worse condition than when they applied for relief. I have had the good fortune to be able to save many from the operating table by assisting Nature with simple remedies.

The ills which are peculiar to women may occur at any time during their sexual life; indeed even before or after this period. Yet they occur with, much frequency subsequent to, and oftentimes consequent upon, child-bearing. Most married women whose health is seriously impaired by some form of "female weakness" date the commencement of their troubles to a confinement. A variety of influences to which the organs are subjected during pregnancy and labour, results in the aggravation of any difficulties that may, have existed prior to conception. The enlargement of the womb is necessarily accompanied by a stretching of those bands-technically called ligaments-by which the organ is held in its proper position. Some times there has existed before the occurrence of pregnancy a stretching and lengthening of these bands, whereby the womb has been allowed to sink further into the pelvis than Nature ordained.

In such cases walls are distended and stretched during pregnancy and rarely return to their former condition of tension and elasticity, hence the tendency for the various organs contained in the abdomen and pelvis to sink still further into the cavity. If from these or other causes the womb assumes a more depressed condition than is natural, other ills supervene: the return of the womb to its proper size is delayed, or even quite arrested. This results in the lower end, or mouth of the womb being exposed to mechanical violence from friction against the vagina. In this unnatural condition such causes are sufficient to induce ulceration and chronic inflammation, and manifold pains and aches which have no apparent cause--i.e., derangements of the head, stomach, bowels and sexual functions, nervousness and irritability; and perhaps mental derangement, which may transform a woman's mind and body within a few years after marriage.

The various forms of female weakness are, in the majority of instances, caused, previous to marriage or during pregnancy. Personal habits have much to do as predisposing causes in these diseases. Habitual errors of diet resulting in constipation and general physical inactivity, inducing sluggishness of the pelvic circulation, cause a functional disturbance of the ovaries and uterus. Engorgements of the liver, arising from whatever cause, may produce disturbance of the portal circulation to a degree that will induce passive congestion of the pelvic organs; and other diseases are provocative of female troubles. Every part of the female genital organs, internal or external, is liable to inflammation at any period of life. If external, the parts become dark-red, hot, dry, very tender, and much swollen. There may be thin, white-yellowish discharge; the passage of urine causes more or less scalding, walking increases the suffering by rubbing the tender surfaces against each other, the discharge may become acrid, and the skin around the genitals excoriates. We often find this in fat and scrofulous children. If not attended to and kept clean, the parts may grow together.

Rest in bed is most important, and the parts must be kept clean by washing often in lukewarm water with one teaspoonful of bicarbonate of soda added to neutralize the acrid condition; dry well, and dust with fine Slippery elm powder every few hours. Drink freely of Clivers Tea made from the herb, and keep the bowels regular.

Again, inflammation of the vulva may be followed by abscesses in and around the little glands which are located on each side of the orifice of the vagina. These glands naturally secrete a watery fluid and communicate by fine, hair-like canals with the surface. At times these canals become closed, and the fluid, being no longer allowed to escape, distends the glands themselves, making a doughy, painless swelling. If this condition is not relieved, abscesses form which may be of various sizes, accompanied by pain, swelling and tenderness in the groin. This may be relieved by a Flaxseed or Slippery Elm and Lobelia poultice, applied warm. It is generally best to leave these abscesses to open naturally, applying the poultices until healing takes place. An infusion of Marshmallow Root and Slippery Elm may be taken freely.

Eczema of the vulva often occurs in the same manner as that of the skin of the body in general. It may be caused by irritating substances, or by an irritating discharge, or it may be due to a condition of the blood. I have noticed this condition occurs in people past the change of life, and it is often very irritating and annoying. To treat these cases the cause must be sought, and removed. Cleanliness is essential and treatment directed to the secretory organs and blood. Avoid highly-seasoned foods, bathe the parts with distilled Witch Hazel and a strong infusion of Raspberry Leaves. Dry well, and dust with Slippery Elm powder.

Intense itching is a symptom of various diseased conditions of the vulva. The itching may extend all around and down the thighs, becoming very annoying. It is often noticed just before menstruation, and at times may remain, and become intense. If the patient rubs and scratches, it becomes a genuine eczema. A warm bed, and heat, aggravate the trouble.

## **Acute Inflammation of the Womb.**

### **Acute Metritis.**

Inflammation of the womb, or uterus, is due to many causes. The patient usually complains of weight and a dragging pain in the small of the back and thighs, often extending around to the front. The bladder becomes sensitive, and evacuations constant and painful, from both bowel and bladder. The general symptoms are not usually severe: headache, loss of appetite, possibly a slight fever. After a few days there appears a discharge from the vagina at first clear and glairy, then white or yellow, and even sanguineous. By this time there is usually a good deal of pain in the lower part of the abdomen, accompanied by a bearing down, such as is felt during labour.

The patient must be kept in bed, as rest is important. A hot foot bath must be given, followed by a tepid sitz or hip bath. At intervals of three or four hours, vaginal injections of from one to two gallons of water will be found of benefit. Suspend the vessel about two feet above the patient, letting the water flow in very slowly, as a greater force might result in damage to the womb. The injection should be continued for 20 or 30 minutes at each application, during which the patient should be lying down. In this way the water gets to all parts of the vagina and womb, cleansing away all offensive discharges and helping to remove the inflammation. Let the patient rest for half an hour, then press a pledget of cotton saturated with glycerine into the vagina, or pack the vagina with Slippery Elm mixed with water to form a thick paste. This will give great relief and eventually cure and is all the treatment necessary. Keep the bowels regular. If not properly treated, this condition becomes chronic.

## **Chronic Inflammation of the Womb.**

### **Chronic Metritis.**

At times, this condition may be present for a considerable period without causing any trouble or even attracting attention. The first symptom is usually pain in the back and dragging sensation in the loins and pelvis, increased by muscular effort or exercise, and accompanied by a profuse glairy or white discharge.



Later there may be derangements of the menstrual function; the discharge, may be too abundant or too scanty, too frequent or too seldom, or painful with clots sometimes a cast of the cavity of the womb may be expelled. Later constitutional symptoms may develop, with loss of appetite, impairment of digestion and imperfect nutrition, the patient becoming, very nervous, irritable, and even hysterical, headaches also are usually located at the top of the head.: In many cases the symptoms resemble the signs of pregnancy, there being distention of the abdomen from the accumulation of gas in the intestines, and irregularity or the suppression of the menses. Regular evacuation of the bowels and bladder is important. Give treatment for the general health, as diseases of the womb will usually persist until the general health is improved. At the same time follow the treatment for acute inflammation, giving a Uterine Tonic, as follows:

Blue Cohosh, powdered.....	1	teaspoonful.
Wild Yam	"	"
Squaw Vine	"	"
Cramp Bark	"	"
Motherwort Herb "		1/2 oz.

Make into infusion with 1 pint of boiling water. Take in wineglassful doses, 4 times daily.

When not checked, the inflammation extends to the surrounding organs, setting up various derangements and displacements, which I will endeavour to treat separately.

The object of treatment in the early stage is to limit the extent of the inflammation, and, thereby to avoid, if possible, not only the more painful, but also the more disastrous consequences of the disease. Whenever there is chill, fever, pain, and tenderness in the abdomen, the patient should go to bed-rest is very important. Apply heat and moisture to the inflamed parts: wring towels out of hot water and apply; cover with a hot blanket tightly and neatly, and apply a hot water bottle. At the same time give the vaginal injection or douche, the water being as hot as can be conveniently endured. Where there is much inflammation give this two or three times daily. Secure an evacuation of the bowels.

Secure an evacuation of the bowels. Displacements of the wo sometimes develop when proper rest and treatment is not followed. The patient performs her daily duties, not knowing th troubles that may develop. Often these conditions arise from abortions, curettements, mismanagement at confinement, gettin up before the womb and parts are healed; heavy, laborious wor sexual excesses, falls, &c. Where there is a long-continued existence of a chronic inflammation of the womb, it usually results in an increase in the size of this organ. The weight of th womb naturally stretches the bands or ligaments which hold th womb in place, and these supporting ligaments are no longer a to maintain the organ in its proper position. This condition is v often caused by the excessive stretching of all these parts durir the process of delivery; rupture or tearing of the uterine suppoi during pregnancy and confinement; the pressure upon the wor from above, exerted by the weight of clothing suspended at the hips, and is aggravated by the pressure of a tight corset. This falling of the womb is called prolapsus, and is usually found ir married women. Yet it occurs in girls, as also in women who h passed the child-bearing period.

Sometimes a slight displacement will cause the most annoying symptoms such as pains in the back and loins, a sens of weight in the pelvis, leucorrhoea, inability for physical exertion, and pain and difficulty in evacuating the bowels and bladder. Here the patient must keep a regular evacuation of the bowels, regulate the diet, and wear loose clothing made so as t suspend from the shoulders. Use injections or vaginal douches Tampon the vagina with Slippery Elm Powder mixed with col water-two or three small pieces inserted in and around the wor letting them stop in two or three days, then wash out. Improve the general health. Rest in a reclining position as much as possible. This will be far better than wearing any mechanical instruments such as pessaries: they are only for a support, and a cure. By assisting Nature, toning the tissues, and strengtheni the ligament,s the large uterus will get smaller and naturally return to its proper place.

### **Endo-metritis.**

An inflammation of the lining membrane of the uterus. It may be either acute or chronic. Acute endo-metritis may be divided into three forms- 1. Cervical, in which the mucous membrane of the neck or cervix of the uterus is involved. 2. Corporeal in which the mucous membrane of the body only is inflamed. 3. General, in which the entire lining of the uterus is inflamed. This is the most common form. It may be caused by taking cold, either just before or during menstruation, or from fevers. It may follow inflammation of the vagina, as described in the article on "Diseases of Women". It may be caused from infection, either from the hands of the physician or nurse making vaginal examination, or from neglected labours. This type of inflammation is seldom seen before puberty. When from a cold or any other cause, an acute catarrh of the uterine mucous membrane develops, followed by a congestive swelling of the muscular substance, the blood-vessels become gorged with blood. From this congestion results an infiltration and softening of the membrane. This being destroyed and thrown off, a marked secretion, at first serous, later purulent, or composed of pus mixed with blood, is generally found; the cervix, or neck, body, or whole uterus is enlarged, according to the seat of inflammation. The cervix is much swollen and the os or neck often open and eroded. A tenacious, sticky, white or yellowish-white discharge escapes from the uterus; it may be acid or alkaline, and is usually very irritating, as it passes along the vagina. This discharge is a marked feature: at first it is profuse, thin, and watery, later becoming thick, like the white of an egg. Disorders of menstruation are apt to be present; the patient complains of pain and weight in the pelvis, and pain in the loins, legs, and back.

If this inflammation is not checked, complications will develop, the inflammation extending through the tubes and ovaries, or it may extend through the uterine tissues to the cellular tissue surrounding it, or to the peritoneum above the uterus, causing peritonitis.

In these cases absolute rest in bed from the first, is essential. Hot or cold fomentations, injections by the vagina; and warm injections by the rectum should be given. It is best to use simple Tincture of Myrrh in the water for injections-One teaspoonful of Myrrh to one quart. Give tablespoonful doses every hour of the following two recipes on alternate days -

No. 1.

Squaw Vine Powder.

Wild Yam Powder.

Blue Cohosh Powder.

Marshmallows Powder.

Of each, equal parts, mixed. Make an infusion, 1/2 oz. to 1 pint of boiling water.

No. 2.

Marshmallow Leaves 1/2 oz.

Comfrey Leaves 1/2 oz.

Chickweed Herb 1/2 oz.

Pour on 1 1/2 pints of boiling water and give the same as in No. 1 recipe. This infusion is also good for injections, as it is very soothing and healing, and allays pain.

A light, nourishing diet should be given.

An excellent food for inflammation of the lining of the uterus is made as follows -

Slippery Elm Bark Powder 2 oz.

Marshmallow Root Powder 2 oz.

Comfrey Root Powder 1 oz.

Composition Powder 1/2 oz.

Sugar Powder 6 oz.

Mix well. Take 2 teaspoonfuls and place in a cup. Fill half-full with boiling water, stirring well, then fill up the cup with hot milk. This will be found to be very nourishing, soothing, and stimulating.

### **Chronic Endo-Metritis.**

Chronic endo-metritis often follows the acute form, or may be caused by cold or a depleted condition of the blood or nervous system. Frequent miscarriages, badly-managed labours, getting up too soon after confinement, uterine displacements, malformations, lacerations, sexual excesses, are other causes. The patient complains of a heavy, dragging continuous pain in the lumbar region and loins increased by standing, sitting, or walking, and especially if the patient makes a misstep. There may be pain down the thigh and between the shoulders. Vague pains may also be felt in other parts of the body. Headache in the front or on the top of the head is very common. A leucorrhoeal discharge is a constant symptom; it may be thin and almost clear, or thick, like the white of an egg. The discharge may also be yellowish or greenish when pus is present. Various menstrual disturbances may appear. The menses may be scanty or profuse, and painful. Where there is great debility, the flow may stop. Nervous symptoms are very prominent, accompanied by neuralgia and dyspepsia.

The patient must have complete rest in bed, and be given copious injections of two gallons of warm water in which is dissolved half a pound of Epsom Salts, three or four times daily, Hot sitz or hip baths are very useful if given when the inflammation abates. Slippery Elm packs, or tampons soaked in glycerine placed in the vagina against the uterus, three times weekly, will do good in removing any inflammation. Give the patient an infusion of Raspberry Leaves and Marshmallows (half an ounce of each to a pint of boiling water), in teacupful doses every two to three hours, warm.

### **Uterus.**

A study of the anatomy and structure of the uterus will enable us to understand the many diseases and complications connected with this organ. The uterus is a pear-shaped organ situated in the middle of the pelvic cavity, between the bladder anteriorly and the rectum posteriorly.

It is the organ in which the fecundated ovum is retained and developed during embryonic life. The size is variable, depending first on the period of life, increasing at puberty and diminishing with old age; second, to certain physiologic or pathologic conditions, such as pregnancy, menstruation, endometritis, &c. The average length of the uterus or womb is three inches, its width about two inches, and one inch in thickness. Towards the end of pregnancy it attains the length of a foot or more, and measures about eight to ten inches transversely.

The uterus, for the purpose of description, is divided into three parts: the fundus, body, and neck or cervix. Owing to the thickness of its walls the cavity of the uterus is comparatively small. This cavity is triangular in shape, and has three openings, one at each upper angle, communicating with the Fallopian tube; and one the os internum, opening into the cavity of the cervix below. The walls consist mainly of bundles of plain muscular tissues arranged in layers, which run, cross, and interlace in every direction. The outer surface is partially covered by the peritoneum and lined with a mucous membrane which is very richly supplied with blood vessels, numerous mucous glands, and cells with a hair-like appearance.

### **Ovaries.**

The ovaries are two small almond-shaped bodies situated one on each side of the uterus between the folds of the broad ligaments which hold the uterus in place, and below the Fallopian tubes. Their function is to produce, develop, and mature the ova, and to discharge them, when fully formed to the surface of the ovary; from which they are carried to the uterus by the Fallopian tubes.

The uterus, ovaries, and Fallopian tubes are held in position between the bladder and rectum by eight ligaments and are freely movable, their position changing with respiration, distension of the bladder and rectum, and slightly with the position of the body.

The normal position of the uterus may be changed by any condition which causes the uterus to become too large to remain in the pelvic cavity, such as pregnancy, large fibroids, ovarian tumours, collections of blood or fluid, or solid tumours in the vagina. This organ may, through adhesions or tumours, be drawn forward, backward, or to either side changing the relation of the body with the cervix, or it may bend over on itself. The conditions are called anteversion, retroversion, retroflexion, and prolapsus. These conditions are due to various causes as inflammations, congestions, or lack of general muscular tone, relaxations of the uterine ligaments or loss of the retentive power of the abdomen.

The organ is abundantly supplied with a gangliated network of arteries, veins, lymphatics, and nerves and nerve plexuses. All nerves and blood vessels run or course along together, while sympathetic nerves form a plexiform network on the walls of the blood-vessels.

In the lower end of the pelvis, located about the second sacral vertebra, and the proximal border of the symphysis pubis, lies a network of nerves called the pelvic brain. It controls and presides over the uterus and its appendages, the vagina, rectum, ureter, and bladder. The pelvic brain, next to the abdominal brain, is the largest and richest ganglion of the sympathetic nerves.

The pelvic brain receives, re-organises, and emits nerve forces, and has the functions of rhythm, absorption, secretion, ovulation, menstruation, and gestation. It is subordinate in function to the abdominal brain, which is located at the proximal end of the abdominal cavity, a little below the diaphragm, and corresponding to the level of the first lumbar vertebra. The cranial brain presides over the mental and moral progress, physical protection, and consciousness of right and wrong. The abdominal brain, the centre of life presides over organic life. It is a reflex centre in health and disease. It presides over nutrition and over the organs of generation, ovulation, menstruation, and gestation. It is a receiver, a re-organiser, an emitter of nerve forces.

It controls circulation and glandular secretion, and presides over all the abdominal viscera. Knowledge of the abdominal brain is important. For example, in post-partum haemorrhage, pressure over the abdominal aorta, massage or manipulation, stimulates the arteries, which is transmitted to the pelvic brain. Here the muscular fibres, being excited, contract the ligatures, thus checking the haemorrhage. In feeble labour pains, during uterine inertia, vigorous uterine contractions may be excited by the finger per rectum or per vagina, irritating or massaging the pelvic brain. Again, the mammary glands are connected to the abdominal brain through the nerve plexuses accompanying the mammae and subclavian arteries, also through the nerve plexus accompanying the intercostal arteries to the aorta, thence to the abdominal brain; also by the nerve plexus accompanying the epigastrica, superior and inferior vena cava, to the common iliac, and thus to the abdominal and pelvic brains. By massaging or irritating the nipple and mammary glands the abdominal and pelvic brain is reached, resulting in a contraction of the uterus. Hot fluid given internally will stimulate the gastric plexus, and consequently the abdominal brain, where it is then sent to the uterine plexus, and in this way increases uterine peristalsis.

The peculiar cycles and rhythms throughout the life of women demand attention to the wide domain of the sympathetic nerve, not only in health, but also in disease.

The question may be asked "What is a nervous ganglion?" A nervous ganglion is a collection of nerve cells. Its constituents are nerve cells and nerve fibres. It is an ideal nervous centre, having a central conducting and peripheral apparatus. A ganglion is a little brain, a physiological centre. It has the power of receiving sensation and transmitting motion, it is automatic in itself, and possesses the power to nourish and control secretion. Reflex action can be demonstrated in it. What are called motor, sensory, and sympathetic nerve fibres are found in its composition.

## FUNCTIONAL DISEASES.

Under this head we class Leucorrhoea, Amenorrhoea, Dysmenorrhoea, Menorrhagia, Chlorosis, and Hysteria.

The peculiar feature of a nervous ganglion is rhythm. It performs cyclical movements. It has a periodic function which continually waxes to a maximum or wanes to a minimum. It lives a rhythmic life. It is beyond the control of the will.

The intimate and profound connection of the genito-urinary organs with the sympathetic (and cerebro-spinal) nervous system will strike us as we go over the different conditions and diseases of women.

### Menstruation.

Menstruation is a regular, monthly rhythm of the uterus and oviducts. It usually begins at the age of 15 and ceases at the age of 45 years. It continues four days each month, the bloody fluid amounting to two ounces, and there should be no pain. It requires an average of 18 months for menstruation to become regularly established. At the change of life it requires 2 1/2 years on an average for the monthly flow to cease.

The beginning of puberty shows vast changes in the entire vascular system, and also much change in the whole sympathetic system, as also in the field of nutrition. The most manifest change at puberty is shown by a perturbed nervous system.

Menstruation belongs distinctly to the oviducts and uterus. It has a singular rhythmic action. It is controlled by the automatic menstrual ganglia situated in the walls of the oviducts and uterus.

These rhythmic little brains manifest themselves by circulatory change and increased motion. At the monthly or menstrual period the oviducts and uterus are congested and in active peristaltic motion. The oviducts are swollen, thickened, and oedematous, and the congestion of the uterus is intense but not so manifest as that of the oviducts.

Ovulation is a progressive, non-periodic process. It begins before birth and continues until the ovarian tissue is atrophied or worn out. It is liable to occur at menstruation because of the vast blood supply at that time, which hastens the follicle to ripen and burst.

The views here contained show that menstruation is governed by nervous ganglia situated in the walls of the oviducts and uterus.

### Leucorrhoea.

Synonyms.-Fluor albus (white flow), or female weakness

An excessive and altered secretion of the mucous furnished by the membranes lining the vagina and uterus, by the follicles of the interior of the cervix uteri, and by the lacunae of the vestibulum; generally white, or nearly colourless, and transparent; usually without much odour; glutinous, mucopurulent or purulent; sometimes yellow, green, or slightly sanguineous, and of varying degrees of consistency. The amount of constitutional derangement depends on the severity of the affection and the susceptibility of the patient. The ganglionic nervous system being weak and unable to nourish the tissues, causes structural changes of the parts, or an inflammatory condition caused by erosion, ulceration, non-malignant disease of the os cervix, and chronic inflammation is essential to the production of the discharge.

It usually appears a day or two before the menses, and continues profusely for several days after the menses cease. It arises from decided constitutional causes, which must be removed and the general system built up.

### Amenorrhoea.

The absence or marked deficiency of menstruation at a time when it naturally should appear is known as "suppressio mensium," or when it has never appeared it is known as "emansio mensium." Suppressio mensium may be dependent upon congenital deficiency, malformation, or upon structural disease of the genital organs; or it may depend upon a low and partial development of the uterine organs, or upon debility, or upon the opposite condition, plethora. Where the ovaries are wanting, neither menstruation, nor conception can occur.

The general health may be good and vigorous, but there will be no development of the generative organs, the breasts will resemble those of the male and the voice will be mannish. Again, the uterus may be non-existent, though the ovaries are present and the female well developed. Stenosis or atresia of the cervical canal, overtaxing the nervous system, shock, either mental or physical, will cause suppression of the menses; so will colds. The patient complains of headache, tension and weight about the brain, has a florid countenance, suffers from torpor, lassitude, pain in the back and loins, and irregular circulation. The skin is sometimes harsh and dry, and at other times clammy.

If this occurs at the menstrual period, then the feet should be put into warm mustard water for 20 or 30 minutes, and warm hip-bath be used; or instead, the patient may sit over the vapour of decoction of bitter herbs, as Tansy, Hops, &c. Internally: give the following –

Tansy	1/2 oz.
Pennyroyal	1/2 oz.
Scullcap	1/2 oz.
Ginger Powder	1-1/2 teaspoonfuls.

Infuse in 1-1/2 pints of boiling water; strain, and drink warm-1 teacupful 4 times daily. See that the bowels are regular. Warm clothing and fresh air are very necessary.

### **Menorrhagia.**

Menorrhagia is a condition where the menstrual flow is too free, or lasts too long. In either case the condition is known as excessive menstruation or menorrhagia.

It may be caused by those conditions which cause congestion of the pelvis, especially those which cause congestion of the uterine mucosa. It may occur, at any age, either in the plethoric and robust, or in, those of a delicate and exhausted habit of body.

It may be caused by

- Malignant diseases of the uterus; pelvic inflammation;
- Infection of any kind;
- Subinvolution;

Retained secundines from an incomplete abortion;  
Diseases that interfere with the return of the blood from the pelvis (such as heart disease with failing compensation, obstructive liver disease, and abdominal tumours) necessarily tend to uterine congestion and consequent menorrhagia.

Diseases that cause frequent straining efforts (such as constipation, chronic diarrhoea, stricture of the rectum, and chronic cystitis) lead to pelvic congestion and excessive menstrual flow.

TREATMENT.-The cause should be sought for and removed. Rest in bed and perfect quiet, with copious vaginal injections of hot water are very serviceable. Use astringents, such as Bur-Marigold and Witch Hazel or Bayberry, in a strong infusion and use as an injection. For a drink, make an infusion according to the following recipe, which will be suitable for all the foregoing conditions, as it is at once strengthening and correcting to the parts, as well as stimulating and toning to the whole system:

Witch Hazel Powder	1/2 oz.
Bayberry Powder	1/2 oz.
Bur-Marigold Herb	1/2 oz.
Ginger Powder	1/4 oz.

Infuse in 2 pints of boiling water, stir well, and drink half a teacupful of the clear liquid every half hour.

Or take

Oil of Erigeron	1/2 oz.
Oil of Cinnamon	1/2 oz.
Dose; One to five drops every 15 minutes on a piece of lump sugar.	

When other means fail, the vagina should be tamponed with absorbent cotton. Having checked the flow temporarily, the next thing is to prevent the occurrence by reducing the congestion of the uterus and other pelvic structures, thus toning up the uterus and putting the patient's blood in good condition. If there are any local diseases, correct them.

### **Dysmenorrhoea.**

Painful menstruation is the most troublesome of the menstrual disturbances, causing many women much suffering every month. In many the menstrual flow is always accompanied and preceded by pains in the back, limbs, and hypogastric region. These pains are sometimes slight and of short duration, and do not produce much uneasiness, and are not to be considered as dysmenorrhoea; but when these symptoms are aggravated, so as to produce extreme suffering, this disease is said to exist. We have four varieties of this affection :

1. Neuralgic or Ovarian Dysmenorrhoea.
2. Congestive or Inflammatory Dysmenorrhoea,
3. Obstructive or Mechanical Dysmenorrhoea.
4. Membranous Dysmenorrhoea.

1.-Neuralgic Dysmenorrhoea is usually found in neurotic subjects. It may arise secondarily from, a general neuralgic diathesis, from malaria, gout, or rheumatism. The pain is usually most severe before the onset of the flow, or during the first few hours. The pain is usually pelvic, with extension down the loins, and its character sharp and steady, not expulsive. The pelvic pain may be accompanied by neuralgia in other parts of the body. The flow is usually steady and without clots, and no signs of inflammation exist between the periods the patient is usually free from pain.

2.-Congestive or Inflammatory Dysmenorrhoea is usually due to exposure to cold or dampness, inflammation and displacements of the uterus, engorged portal circulation, pelvic or uterine tumours, or peritonitis.

When the dysmenorrhoea is acute, the attack 'comes on with a severe pelvic pain, followed by a diminution or, possibly, complete cessation of the discharge. This pain generally lasts all through the period, 'except when, occasionally a free flow relieves it. There may be some increased temperature, pain in the head, nervousness, restlessness, and a full, rapid pulse. The skin is hot and dry, and the eyes suffused. There may be diarrhoea or rectal or vesical tenesmus. When due to such causes as displacements, tumours, &c., the condition is marked by a certain sense of weight in the back and pelvis, and some leucorrhoea between the periods, these symptoms, increasing just before the flow begins and then assuming the type before-mentioned.

3.-Obstructive or Mechanical Dysmenorrhoea is a violent spasmodic pain, usually caused by some mechanical obstruction either in the vagina or cervix uteri, which may be caused by (1) stenosis or atresia of the os uteri or (2) atresia of the vagina, due to inflammation, cicatricial bands, or imperforate hymen; (3) flexions of the uterus; (4) tumours obstructing the cervical canal or (5) spasmodic contraction at the internal os. When the accumulation of menstrual blood beyond the point of tolerance causes the uterus to contract violently in its efforts to expel the offending material, it results in or causes sharp, spasmodic, cramp-like pains like those of miscarriage, and is followed by partial or complete relief when a quantity of blood is expelled.

4.-Membranous Dysmenorrhoea. This variety consists in the expulsion of organised material from the uterine cavity, at the menstrual periods. This material is found, on microscopic examination, to consist of the lining membrane of the uterus itself.

This is generally caused by a reduced general state of health accompanied by severe continuous pain, increasing as the menstrual period advances. The pains are expulsive in character, and are accompanied by dilation of the os. After the discharge of the membrane the pains cease. These symptoms recur at each menstrual period.

TREATMENT DURING THE FLOW.-The first thing to do is to relieve the patient. Put the patient to bed and have hot stupes applied to the lower abdomen. Use hot injections. Have the bowels freely opened by an enema. The diet should be plain and unstimulating. Give internally-

Viburnum Prunifolium	1 oz.
Blue Cohosh	1 oz.
Wild Yam	1 oz.
Lobelia	1 oz.
Powder Zingiber	1/2 oz.

Or make the following -

Catnip	1 oz.
Lobelia	1 oz.
Pleurisy Root	1 oz.
Virginica Snake Root	1 oz.

Infuse in 2 pints of boiling water for 10 minutes.

Strain, and drink in wineglassful doses every hour whilst the medicine is warm.

Continue taking either of the above during and after the menstrual period.

### **Other Menstrual Disturbances.**

Intermenstrual pain occurring at a certain time every month is not an indication of any particular lesion; it may be pelvic neuralgia, due to different conditions in different cases. The periodicity of the pain-that is, its appearance each month a certain number of days after the cessation of the menstrual flow-is probably dependent in some way on the menstrual variations in the blood pressure. The menstrual flow may be irregular. It may come too soon, the interval being only ten days. or two weeks, or it may not come soon enough, running over the time from one to two weeks. It is sometimes difficult to determine positively whether the irregular flow complained of is really menstruation or simply a bloody discharge from some disease of the vagina or uterus.

Unless the bleeding resembles closely the menstrual flow in character, onset, and duration, it should be regarded as abnormal, and proper treatment applied.

Precocious menstruation is the appearance of menstruation at an early age. For genuine menstruation to take place, there must be considerable development of the genital organs, and this very rarely occurs before the age of 10. Rare cases have been recorded in all ages, even in infancy. It has been known to begin in infancy and continue regularly. I once treated a child of two years for such a discharge, who, after treatment, returned to normal. There is usually precocious development of the breasts and of the external genitals. Great care is necessary in determining precocious menstruation in a given case. Every stain of blood does not mean menstruation. The blood may come from some inflamed or irritated area, ulcer, or growth on the vulva, vagina, uterus, rectum, or bladder. In infants a slight bloody uterine discharge occurs not infrequently within the first week or two after birth. It is not a menstrual flow, and it soon disappears. Again, a red stain on the diaper, which the mother supposes to be blood, is often made by urates from a concentrated urine.

Vicarious menstruation is the discharge of blood from other parts of the body at the menstrual time. The uterine discharge may or may not be wholly or partially suppressed. The bleeding usually takes place from the nose or from some open sore, though it may come from almost any mucous surface, such as the lungs, stomach, bowels, bladder, or rectum; and it has been known to occur from the axilla, the ears, the mammae, the mouth, gums, fingers, toes, or from ulcers-in fact, from nearly every portion of the body. At the affected site there appears an ecchymosis, and later a distinct flow of bloody serum. Though this haemorrhage might at times seem alarming-as, when from the lungs, to indicate tuberculosis-yet, when the suppression of menstruation is taken into consideration, it has not that importance which it would otherwise assume. This vicarious haemorrhage is probably an effort of Nature to establish a supplementary issue for the menstrual secretion which has been suppressed.



Again, there are other cases where the suppression of the menses continues for several menstrual periods, though each time the discharge becomes less in quantity and lighter in colour, being preceded and succeeded by a leucorrhoeal discharge, until no trace of colour appears. In married women it is difficult to determine whether the discharge has ceased or is due to pregnancy.

Treat the general health, remove any inflammation from the pelvis, and equalize the circulation.

Bathe the feet in warm water, and give warm hip baths. Drink Pennyroyal and Tansy, or Eupatorium Perfoliatum; in warm infusions.

### **Chlorosis.**

Chlorosis, or green sickness.-This is a peculiar condition or affection of the general health, in which debility, languor, and deranged stomachic functions are prominent symptoms, with intense paleness of the skin, lips, and lining membrane of the eyelids, the paleness having a suggestion of green-hence the name. It most frequently occurs when puberty is, or ought to be, established, although it may exist at any period. When a disease of early youth, it is almost invariably connected either with the entire absence of menstruation or with a scanty, painful and irregular performance of the function. If a disease of later life, it may have been caused by haemorrhage or excessive flow, or leucorrhoea. It is strictly a disease of the blood and may arise in either male or female, but it rarely occurs in males.

The primary cause of the menstrual derangement and thus of chlorosis, may have been due to a delicate state of the constitution from childhood, the vital powers not being sufficient to perfect the development of the uterine system and its physiological function, menstruation.

The symptoms develop slowly and become numerous. The patient is weak and generally languid; there is general debility, fatigue, capricious appetite for unusual things-slate pencils, vinegar, & there is dyspepsia, palpitation and shortness of breath white tongue, inside of the mouth pale, offensive breath, heart weak, voice feeble, hands and feet usually cold. With this anaemic condition of the blood, the menstrual flow becomes scanty and often ceases. The bowels become constipated, the urine pale although abundant. Chlorosis, of itself, is not fatal; but the danger lies in organic diseases that may follow, such as dropsy, paralysis, valvular disease of the heart, or consumption.

To effect a cure we must find out the cause and remove any disease which may exist. Treat the stomach and bowels, as these are the first organs specially affected. Restore the blood to its normal condition by the use of tonics, nutritious diet with easily digested foods, moderate exercise, and fresh air. Salt-water baths are beneficial, with massage.

Equalize the circulation and build up the general health, then the natural functions of the body will return.

### **Hysteria.**

Hysteria is the highest pitch of nervous reflex action due to derangement in the generative system.

It usually occurs in women over fifteen years of age. The fit commences with a severe pain in the head, coldness and shivering all over the body, and a quick fluttering pulse. A paroxysm is usually preceded by a general uneasiness, anxiety, and oppression, a sensation of choking, or as if a ball were rising up from the abdomen into the throat, where it seems to remain for some time, and causes a sense of suffocation, succeeded by stupor, insensibility, and convulsions.

Sometimes the patient laughs and cries in the same breath, beats her breasts, and shrieks, although not entirely deprived of consciousness. During the struggling, the heart beats tumultuously, the countenance becomes flushed and swollen, and the breathing laborious. After a variable continuance of from a few minutes to some hours, or even days of repeated intervals of struggling and repose, the patient either falls asleep or gradually returns to a state of consciousness and her ordinary condition, save for a feeling of fatigue and soreness, which, disappears in a few days.

In some women the paroxysms return monthly, or at the menstrual flow; in others, at variable intervals, depending on the mental equability. Tea made from Motherwort, and used instead of ordinary tea, will be found useful. Equalize the circulation and quieten the nerves by giving Composition and Nerve Powder in equal parts. The Nerve, Powder is made of Scutellaria, Asafoetida, Valerian, Southern wood, and Mugwort, in equal parts. Half-teaspoonful in a cup of hot water four times daily. Mistletoe is also very useful. Attend to the general health, and keep the bowels normal.

#### **St. Vitus' Dance (Chorea).**

This disease is an affection of the nerves giving rise to irregular and uncontrollable jerking or twisting of the muscles of parts, or even in rare cases, of the entire body. The mind and functions of the brain are not affected, beyond the apparent loss of control over the muscular action. Most cases begin gradually, through impaired digestion; accompanied by headache, wakefulness, irritability, and low spirits. The muscles of the head, mouth, and tongue are early affected; then the arms, legs, and, lastly, the whole body, if the disease is allowed to progress. The disease is chiefly incident to children and young persons of both sexes, seldom occurring, for the first time, after the age of puberty and when the menstrual flow is established.

Anything that excites nervousness is a drawback to recovery, as anxiety, fear, quarrels, or chidings.

The patient must be kept in as calm and quiet a state of mind as possible. Salt and sulphur baths are valuable. Give nervine tonics, such as Scullcap, Valerian, Lady's-slipper; also establish the menstrual flow by giving-

Viburnum Compound 1 oz.

Wild Yam 2 drs.

Simple Syrup 4 oz.

Dose one teaspoonful 4 times daily.

Search for the exciting causes, and remove them.

Expel worms, if any.

#### **Epilepsy (Falling Sickness).**

This is one of the oldest diseases known to medicine. In the majority of cases a paroxysm occurs without any warning; in others there is a certain amount of premonition. In many there is headache, dizziness, ringing in the ears, irritability of temper and specks floating before the eyes, before the attack.

In, many cases there is no warning symptom until a few minutes before the fit begins. In these cases there is a feeling of tingling, or pain in one of the fingers or toes.

When attacked, the patient suddenly loses all sense and power of motion: if standing, she is immediately prostrated, then seized by violent spasms, moving the limbs and trunk of the body in different directions. The patient usually falls forward on his or her face, often injuring the head and face severely.

These cases should be treated with strong antispasmodics and nervines, which equalise the circulation, and draw the blood from the brain and upper extremities to the feet; also give hot footbaths. Treat in the same way as fits, spasms, or convulsions

### **Neuralgic Rheumatism of the Womb.**

The womb is subject to an affection of its nerves which provokes paroxysms of pain, and leaves the organ painful and sensitive between the 'more acute' attacks. It is properly a form of neuralgic rheumatism. It resembles the, neuralgic form of painful menstruation, where the suffering is peculiarly periodical, and abates on the appearance of the menses; but in rheumatism the pains and tenderness are nearly continuous, and the paroxysms of aggravation do not occur with any regularity, though likely to be most severe about the menstrual period. Pain is felt in the lower part of the abdomen and in the loins. Mental excitement or bodily exertion may aggravate the pain, and provoke the most extreme suffering for many hours, or even days. It is generally accompanied by a sense of heat, fullness, heaviness, and bearing-down through the lower part of the pelvis. Pressure above the pubes reveals tenderness of the womb, and sometimes the least touch to the abdomen causes suffering, and the vagina may also be irritable, and the mouth and neck of the uterus quite sensitive. This state of things is nearly constant; the pains sometimes abate suddenly, and after a time return suddenly. In most instances the patient seems never to be entirely free from pain. It may occur in females who have no rheumatic difficulty elsewhere, but those who are subject to rheumatism and neuralgia are most liable to this affection of the uterus. It causes no displacement, nor inflammation of the organ, nor leucorrhoea.

This condition may be developed in the uterus by the contraction of cold, sudden suppression of the menses, or heavy labour during menstruation or too soon after delivery. During paroxysm, the patient must lie perfectly still. Apply hot fomentations and give diaphoretics to induce perspiration, and a Compound Lobelia. Pill every hour. Antispasmodic drops in an infusion of Lady's-slipper and skullcap may be used as an alternative. Use Rheumatic Liniment externally.

### **Neuralgia.**

Neuralgia may occur in the reproductive system as in other parts of the body.

The pain is always intense, varying from the endurable pain to that which is agonizing. The cause is not known, but is generally thought to exist chiefly where the vital powers are lowered; where the nerves are weakened and exhausted. Women whose cares are burdensome, who know no rest from the sexual demands of husbands, are, in addition, common martyrs to some form of neuralgia.

### **Dropsy of the Womb (Hydrometra).**

Uterine dropsy consists of an accumulation of fluid within the cavity of the uterus, which is retained either from inertia or from some morbid change in the structure of the organ. This accumulation may consist of a serous fluid, mucus, pus, or of a dark, sero-sanguineolent fluid. The lining of the uterus secretes a serous fluid which keeps its surface moist. When not allowed to escape into the vagina, it must accumulate, causing dropsy. A tumour in the cervix may be one of the obstructions. It is oftenest met with in women of middle age, and especially the married. It may occur during pregnancy, when it causes unusual distention and weight in the abdomen. The symptoms are those of pregnancy, no suspicion arising to the contrary until the period of quickening arrives, the size of the abdomen increases, with more or less rapidity, and the swelling, which commences in the middle of the hypogastrium, gradually extends from below upward; the breasts lessen or increase in size; there is suppression of the menses, sometimes sickness at the stomach; secretion of milk; the countenance, which is bloated and pale, bears the impress of languor. There is a feeling of weight in the pelvis, pains in the loins, dragging sensation in the groins, and sometimes a slight degree of fever. By examination and palpation, the enlargement of the abdomen is found to be soft and fluctuating. If the disease continues for any length of time, the general health will suffer, the appetite will become impaired, and dyspepsia result; later the pulse will become small and quick, skin dry and harsh, bowels irregular, urine scanty, depositing a brickdust sediment.

To overcome uterine dropsy, the general health must be built up with stimulating tonics in conjunction with vapour baths, warm hip-baths daily for half an hour, or sitting daily over steam rising from Ragwort or Mugwort leaves; liver medicines used at night to secure a full action of the bowels each morning, and thus influence the expulsive powers of the uterus. Vaginal injections are advisable. Often a stimulating emetic will be very valuable, causing a sudden contraction of the abdominal muscles and a severe compression of the uterine tumour, resulting in the expulsion of the contents.

### **Ovarian Dropsy.**

Dropsy may affect one or both ovaries. It is usually preceded by chronic inflammation. An accumulation of fluid begins in the Graafian follicles of the ovary, and often increases to an enormous quantity. The accumulation may exist in a variety of forms, the most common being the simple and multilocular; the simple cyst, varying in size from a pea to a human head, and containing the entire fluid. The multilocular consists of a greater or less number of smaller cysts developed within the original one. The smaller cysts are irregular in size, some enlarging so rapidly that the membranous covering bursts within the parent sac. The fluid matter differs in the different forms of cysts, being thin in the single form, and more dense in the compound; it is usually of the nature of blood and pus.

The early symptoms are very obscure; the patient may feel a dull, heavy pain, or sensation of soreness in the ovarian region, with a sense of weight in the pelvis. A slight enlargement may be noticed in the iliac region. The menses may be suppressed.

Sometimes the symptoms may resemble pregnancy. The weight of the tumour as it grows causes pain and dragging in the back and loins, and pressure upon the neck of the bladder and the bowels, causing constipation and difficult urination. The abdomen enlarges very slowly as the tumour grows, the intestines and other organs being pushed out of place.

This pressure causes universal disturbance, later causing inflammation around the adjoining parts, which causes adhesions, binding the structures together and causing more pain. The general system suffers, the patient becomes pale, nervous, anxious, emaciated, wrinkled, and feverish, and has difficulty, in breathing. Dropsy of the lower extremities develops.

The only successful and sure cure is in the surgical removal of the cyst. If taken in time, the development can be arrested by hot baths, with massage over the parts with Verbascum, (Mullein) and Capsicum Ointment, together, with constitutional remedies and tonics such as-

Fl. Ext., Wahoo	1 dr.
Fl. Ext. Apocynum Andros.	1 dr.
Fl. Ext. Juglans	1 dr.
Cascara Arom.	1 dr.
Syrup Rhei	2 oz.
Simple Syrup	6 oz.

Dose one teaspoonful night and morning.

### **Hydatids-Moles.**

Here we must consider a morbid mass in the cavity of the uterus, arising from a blighted or false conception. "Mole" has been applied to almost any foreign body existing in the cavity of the uterus, from the remains of the placenta after delivery, to the tough, tenacious coagula, which is sometimes formed from the catamenia, or in menorrhagia, &c. There are three kinds:-1, Blighted conception, or false germ; 2, the fleshy mole; 3, the hydatid mole.

1.-BLIGHTED OR FALSE CONCEPTION.-'The life of the foetus has been blighted by some exhaustion or shock of either body or mind. It becomes a foreign substance in the womb, where it undergoes changes, and the vitality of the foetus has been destroyed. In most of these, blighted ova the foetus is altogether wanting, having been dissolved in the fluids.

2.-THE FLESHY MOLE.-In many cases the foetus entirely disappears.

If the foetus has not disappeared, it may retain a fleshy appearance, despite the fact that it may have been dead many days or maceration may take place, the mass becoming soft, flabby, and dark red. In some cases, the foetus becomes dry or mummified, and may remain in the uterus for years.

3.-HYDATIDS MOLE.-This disease is rare. It is probably and not an infrequent cause of abortion due to a degeneration of the villi of the chorion into pedunculated vesicles or cysts. This consists of clusters of sacs, varying in size from a pinhead to a grape, either round or oval in shape, and filled with a fluid either limpid or slightly discoloured with a milky or straw tint. These gradually increase in number and size, putting an end to all foetal development, and may accumulate to enormous masses. They may be expelled after seven or eight months-sometimes sooner. But in cases they remain, slowly accumulating, for five or more years.

The symptoms resemble pregnancy, especially for the first few months. Three symptoms are most characteristic of this peculiar disease:-(1) The uterus enlarges far more rapidly than in pregnancy. (2) Haemorrhage occurs, small in amount or diffuse, irregular, varying in duration from several hours to as many weeks. These haemorrhages become more severe as the vesicles grow into the decidua, and consist of watery and sanguineous discharges resembling currant juice in appearance. They are probably caused by the breaking-down of the cysts, which result from painless uterine contractions. (3) There is a cystic or doughy feel on palpitation, while the outlines of the foetal tumour are very obscure, and no foetal heart sounds can be heard. The haemorrhages may be frequent and profuse, or one attack may prove quickly fatal. When the cysts are found in the vaginal discharge the diagnosis is certain. They are whitish, sago-like bodies, generally surrounded by small bloodclots.

If the flooding or haemorrhage continues, apply cold applications to the vulva, or plug the vagina. Give internally equal parts of Oils of Erigeron and Cinnamon in doses of 5 to 10 drops on a piece of lump sugar every two hours.

If the flooding will not cease, cause contractions of the uterus, if possible, to expel its contents. Give Caulophyllin (Blue Cohosh), Echinacea, and Composition in hot water. Apply a bandage tightly around the abdomen. If the haemorrhage continues the contents should be removed; the flooding occurs afterwards, and the patient should be treated the same as in an ordinary labour case, with haemorrhage.

### **Polypus of the Uterus.**

Polypus of the Uterus is a tumour attached to the uterine wall by a small pedicle. There are several varieties:-1, Glandular and Mucous; 2, Fibrous; 3, Placental; 4, Papillomata of the Cervix.

The glandular variety consists of hypertrophied cervical glands filled with the viscid fluid normally secreted by these glands.

Mucous Polypi are frequently found projecting from the cervix or higher up in the canal.

Fibrous Polypi are small sub-mucous fibroids attached by pedicles. They take their origin within the uterus, frequently from the cervix, and are gradually forced out through the os by uterine contractions, thus becoming vaginal. They are composed of fibrous tissue, and a few blood vessels.

Placental Polypi.-A small piece of tissue may often be felt in the cervical canal, showing that placental remnants are retained which must be removed.

Polypous tumours are attached to the uterus by slender stalks or pedicles, and vary in size from a pea or a marble to a very large size. They are supplied with blood vessels that permit of their growth. Sometimes a growth will close the mouth of the womb, and menstrual fluid accumulates and undergoes decomposition, causing serious disorder to the system. Sometimes the tumour may descend into the vagina, and drag the walls of the uterus with it.

The early symptoms do not differ from those of other uterine affections: there is pain in the back and loins, and derangements of menstruation, which is usually more profuse and painful, containing abundant clots. In Rome the menses may be suppressed or become irregular and the breasts enlarge and become tender. As the abdomen enlarges there is nausea and bearing-down pains, with a sense of weight. In advanced states, there is a discharge of mucus, pus, and blood, followed by haemorrhage. At this time the patient should be kept quiet in bed, and the vagina packed with cotton wool. Tone up the general health and remove the polypus.

Fibrous Tumours are found in the uterine walls, and often develop to an enormous size. In some instances the health is not greatly impaired, and the tumour may cease to develop after having reached a certain size. Again, it may cause serious derangement of the system. There are three varieties: Fibroid, Cancerous, and Polypous. Fibroid tumours of the uterus consist essentially of the same material as the substance of that organ itself. In most cases the growth begins between the ages of 35 and 45 years. There are certain complications which attract the attention of the patient, such as inflammation and displacement of the womb; derangement of the bladder and rectum; piles, menstrual disorders, and constipation, with marked pressure symptoms.

The pain is usually present in the lumbar, sacral, or lower abdomen, or in the thigh on one or both sides. The pain usually comes and goes at first, and is worse when the patient is on her feet, and at the menstrual periods. As the tumour increases in size the symptoms become more marked; the monthly flow becomes protracted, and so profuse that the woman is much exhausted by the loss of blood. As it grows it can easily be distinguished from the increase in size due to pregnancy.

Fibroid tumours of the womb are rarely fatal, the growth of the tumour being arrested at the change of life. Treat and support the general health. Medicines play a small part in this condition. If any disturbance of the functions of neighbouring organs arises, it should be treated.

### **Cancer of the Uterus.**

Cancer of the Uterus is one of the most dreadful ills, and most dreaded by women. It is most frequent after the cessation of the menses, or from the 45th to the 55th year of life. It may occur in those who have borne children. It may attack either the body or cervix of the uterus. Having once started, the disease may extend in three ways :- 1. By continuous growth. 2, by the lymphatics, contiguous cell elements being absorbed and carried through these glands: or 3, by the venous system. The causes may be hereditary tendency, repeated parturitions, lacerations of the cervix, and habitual miscarriages. Little is known of the direct cause.

The first symptom of cancer is a slight leucorrhoeal discharge, with an occasional spot of blood. Whenever menstruation seems to return after the menopause, suspect cancer. This haemorrhage will increase later in the disease - a reddish-brown, foulsmelling discharge, the odour of which is characteristic. Pain may or may not be present. When the body of the uterus is attacked pain appears early, and is of a dull, gnawing character - felt most in the pelvis and back, radiating down to the lower extremities. The general health may or may not be affected until the disease has developed: when debility occurs it is well marked. There may be obstinate constipation from involvement of the rectum, or there may be great pain excited by the act of defecation. From the extension of the disease to neighbouring organs various forms of fistula maybe produced. The general health suffers and presents the most heartrending picture of misery. It is a well-known fact when this disease has advanced to the softening stage, treatment is of no avail. If found out and treated in the early stages, the patient can be helped and her life prolonged for many years by treating the general system.

### **Diseases of the Fallopian Tubes and Ovaries.**

The Fallopian tubes and ovaries are liable to many of the same general maladies that afflict the uterus-inflammations, tumours, cysts, cancer, dropsy of the ovaries, tubo-ovarian abscess, or they may be subject to hernia or prolapse.

The patient will complain of a dull, aching pain in one or both of the iliac regions, deeply seated, and accompanied with sensations of weight and heat, menstrual disturbance, and other conditions according to the disease. The symptoms are of the same general character as those which are present when these maladies affect the uterus, and the treatment is similar to that for uterine troubles.

### **Pelvic Inflammation.**

Pelvic Inflammation is the term applied to inflammation in the pelvis outside the uterus. The inflammatory process may be located in the Fallopian tubes, in which case it is salpingitis or it may be in the ovary, then called oophoritis; or in the peritoneum then called pelvic peritonitis; or it may be in the connective tissue, where it constitutes pelvic cellulitis.

The cause of these various forms of inflammation is the same, viz., infection. The symptoms are much the same, and the treatment is in many respects the same. Practically every case of acute pelvic inflammation can be traced to infection from labour, from abortion, from the use of instruments, or from gonorrhoea. The patient must be kept quiet in bed. She should use the bed-pan, and should not be permitted to get up to a vessel beside the bed. Hot vaginal douches should be applied two or three times daily. Hot applications, or hot packs, will usually relieve the pain. In some cases cold packs are better. Keep the bowels active. Treat general conditions.

### **Displacements and Deviation in the Position of the Uterus.**

The various affections of the uterus may for convenience be grouped thus: Deviation from the normal-(1) in position; (2) in function; (3) in structure.

Under normal conditions the uterus, in its position between the bladder and rectum, is a freely movable organ, its position changing somewhat with respiration, distention of the bladder and rectum, and slightly with the position of the entire body.

It lies slightly forward on the bladder, the body ascending when the latter organ is distended with urine, and descending to certain extent when the bladder is empty.

The factors most potent in holding the uterus in its position and at the same time contributing to its movability, are five in number.

1. The uterine ligaments, which may be described as follow (a) The round ligament, extending from each uterine corner to the labia majora. (b) Uterovesical, bands of pelvic fasciae and uterine muscular tissue, connecting the bladder with the junction between the corpus uteri and the cervix. They prevent the displacement of the cervix backward. (c) Uterosacral, prolongations of the hypogastric fascia, and the uterovaginal tissue, extending from the posterior surface to the cervix, to be attached finally to the sacrum. Their tendency is to prevent too great a freedom of movement of the cervix anteriorly. (d) Broad. These are folds of peritoneum enclosing areolar tissue, round ligamenta, fallopian tubes, ovaries and blood vessels. They prevent displacements of the uterus laterally, anteriorly, and posteriorly.

2. The retentive power of the abdominal cavity.

3. Attachments to the areolar tissue of the pelvis.

4. Juxtaposition of the other organs, such as bladder, rectum, etc.

5. The pelvic floor and perineum; the action of this has been described.

The normal position of the uterus may be changed by various causes, such as inflammations, tumours, relaxation of its ligaments, etc. It must be borne in mind that the changes in position must be of such a character that the free movements of the organ are interfered with, and the malposition must be permanent, unless corrected subsequently by treatment.

The uterus may be changed from its normal position in the following manner: It may be elevated or depressed; the entire organ may be moved forward, backward, or laterally, without changing the direction of the uterine axis or any part of it.

It may be bent on itself anteriorly (anteflexion) or posteriorly (retroflexion). The whole axis of the uterus may be tipped forward (anteversion) or backward (retroversion). When the entire uterus is depressed the condition is known as prolapse.

Any condition which causes the uterus to become too large to remain in the pelvic cavity, such as pregnancy, large fibroids, ovarian tumours with short pedicles, collections of blood or fluid, or solid tumours in the vagina will bring on one or more of these distressing troubles. As the condition is never one of primary disease, the treatment must always be directed to the cause.

The uterus may, through adhesions or tumours, be drawn forward, backward, or to either side without changing the relation of the body to the cervix or producing alteration in the axis.

In flexions the position of the body and neck (cervix) changes their relation so that their canals make an angle with each other. In other words, the uterus is bent over on itself.

### **Inversion.**

The entire uterus (body and neck together) changes its position, the canals of the body and cervix being in a straight line.

Anteflexion is a condition in which the body of the uterus is bent forward on the cervix. This condition is most common in those who have not borne children, and is caused by inflammatory conditions, producing cicatricial tissue which, later contracts and draws the upper portion of the cervix upward and backward; the fundus at the same time being thrown forward. Adhesions resulting from inflammations and tumours may by their weight cause anteflexion.

The symptoms are those of dysmenorrhoea. The pain usually makes its appearance within a few hours before the menstrual flow, and continues until the latter ceases. In some cases the appearance of the flow affords partial relief from pain.

The pain is generally felt in the small of the back, in the lower part of the pelvis, behind the pubes, down the thighs, and on top of the head. Many patients complain of a bearing down sensation much like the beginning of labour.

The menstrual blood is frequently clotted, and the flow is followed in a few days by an irritating, milky discharge (leucorrhoea). There may be derangement of the functions of the bladder and accompanying cystitis due to pressure of the uterus on the bladder.

### **Anteversion.**

Here the uterus lies crosswise in the vagina, the cervix pointing directly backward against the rectum. In this condition the uterus is generally enlarged, hard, and more or less fixed by adhesions. The structural changes which occur in the uterine tissue may follow abortion or pregnancy. The large, softened uterus tilts forward and becomes fixed by bands of adhesions. Dysmenorrhoea is frequently present. Pressure of the fundus ut on the bladder may cause irritation and sometimes inflammation of the bladder.

### **Retroflexion and Retroversion.**

These are backward displacements, the organ at the same time being fixed on its posterior surface. Endometritis and inflammation are usually present, the menstrual flow is scanty and clotted, backache, occipital or coronal headache being constant but increased at the menstrual epochs. Pelvic tenesmus, difficult and painful defecation are often experienced, the stool being small and flat and thin. Leucorrhoea is generally present.

### **Prolapse.**

This is a downward displacement of the uterus, due to relaxation of the vaginal wall and ligaments which hold the uterus in place, and is accompanied by relaxation of the abdominal muscles. The abdominal viscera is thus allowed to press upon the pelvic viscera and supporting tissues which in time yield. Inflammation causes the uterus to be heavy, which, if long continued, destroys the elasticity of the supporting tissues and ligaments. Finally the organ drops.



Too frequent child bearing is often a cause; also exercising after childbirth before the parts have reached the normal size.

Instrumental delivery, not properly performed, abortion, and tight corsets often cause this trouble. By the continued use of tight corsets, the muscles of the abdomen are weakened and the intestines crowded upon the generative system, causing general disorder of that region, preventing a proper and healthful circulation of blood in the lungs; and thus reducing the general health, causing congestion and leucorrhoea. Any protracted disease that greatly prostrates the frame may lead to it. An impoverished diet and unhygienic surroundings may be predisposing causes. Women may also do their uterine organs an injury by acquiring the habit of holding the urine and retaining the faeces too long. Strong and stimulating purgatives often work great mischief by their influence from the lower bowel to the womb.

This trouble may be caused during labour where the perineum is destroyed, lacerated, or torn, thus also taking away the vaginal support. In cases of habitual constipation attempts to relieve the bowels by straining cause the faeces to bulge the rectal wall out into the lumen of the vagina, the proper resistance of the latter being destroyed by the laceration of the levatores ani muscles and perineum. A continuance of this action tends to draw the cervix downwards while the bladder in front prevents its forward movement. Finally, relaxation of the anterior vaginal wall also occurs, resulting in cystocele. In the majority of these cases, the rectocele appears first. Where cystocele is, the first to appear the prolapse usually results from laceration of the anterior vaginal wall during delivery, and this is very often the case where there is a large, heavy uterus. In prolapses of the uterus the bladder and vaginal wall loosen their support and come down, and in some cases appear outside the body.

*Treatment.* Ascertain the cause, and remove it. Replace the womb in its natural position; prevent constipation; remove the weight of clothing from the hips, and for obviating pressure upon the abdomen suspend all clothing from the shoulders; wear a bandage or abdominal support around the hips, so as to keep up the abdominal wall and muscles; rest during the menstrual period in a recumbent position, because at this time the uterus is heavier than in the intervals. The result of these efforts will not be to restore the womb to its proper position, but it will simply remove the obstacles in the way of such restoration by means applied directly to the womb itself. Regulate the diet, and eat plain and nourishing food.

Use astringent injections of Witch hazel leaves 1 oz., Bethroot 1 oz., Chickweed 1 oz., Raspberry leaves 1 oz. Boil in two quarts of water for 10 or 15 minutes. Strain. When cool use as an injection whilst lying down; repeat twice daily. A valuable exercise for these conditions is called the knee-chest position. Use this twice daily for five minutes: Kneel face downwards, with arms and elbows and chest on floor. Gradually raise the hips until the whole weight rests upon the shoulders. This exercise aids greatly in the restoration of health and assists the parts to their normal condition of health. Massage the lower abdominal muscles by kneading, and take exercises to strengthen them. All forms of disorders of the generative system reflect upon the abdominal brain and nervous system, owing to the great supply of nerves to these parts.

The treatment must include the strengthening of the nervous system generally. As a tonic the following will be found beneficial :-

Scullcap	1 oz.
Wild Yam	1 oz.
Sea Holly	1 oz.
Crushed Lump Ginger	1/2 oz.

Simmer or boil the whole in five pints of cold water down to three pints, then strain or sieve. When cold it will be fit for use.

Dose: One to two wineglassfuls to be taken every two or three hours as the case may require.

### **Displacements of Ovaries and Tubes.**

The ovaries and tubes may be subject to hernia or prolapse. This is a rare affection. Occasionally, however, the ovary may pass through the inguinal canal and present itself as a true hernia. It is more common on the left side. Hernias through the crural canal, the umbilicus, and greater sacrosciatic foramen have been known to occur. The uterus alone, or one ovary alone, may escape; or the uterus and one ovary may escape together. The principal symptoms are the presence of a tumour and a dull, sickening pain, nausea, and faintness. The tumour is not soft, fluctuating, or movable as is a protrusion of the bowels. The tumour can be easily forced back. The discharge of urine is more or less disturbed, and sometimes the protruding part becomes strangulated by the contraction of the muscles through which it has burst, and then congestion, suppuration, or even gangrene, may follow speedily. The causes of these troubles are usually weakness of the abdomen, pregnancy, tubal or pelvic inflammations, abdominal dropsy, violences upon the abdomen, etc.

*Treatment.* Place the patient upon the back, loosen all clothing, lift the knees well up towards the abdomen; then by gentle and steady pressure upon the enlargement force the part back through the passage. Hot fomentations should be applied immediately. If possible fomentations made from lobelia seeds should be kept on continually to relax the parts and reduce inflammation. With very little exertion the hernia will return to its place again. Also use injections of lobelia infusion. In cases of long standing and strangulations, replacement may be impossible. A competent surgeon should be called.

### **Prolapsus of the Vagina.**

The walls of the vagina may fall or become prolapsed. This may occur to either the front or back wall, or to both walls at the same time. The prolapse may be partial, in which case the membranes do not protrude; or it may be complete, when the structures protrude beyond the external organs of generation.

This condition may be caused by the tearing of the parts during child birth, or it may be due to traumatism, such as falling against some sharp object. Tearing of the perineum is a very common cause of prolapse of the bladder, rectum, and uterus. The patient feels a sense of weight and uneasiness in the vagina and has a dragging pain, accompanied by a whitish discharge called leucorrhoea, some difficulty of passing water and feces, and a soft round mass presents itself at the mouth of the vagina. As the prolapsus becomes more complete, the weight in the vagina increases to a painful dragging, extending to the small of the back, and walking causes soreness and pain.

*Treatment.* The patient must lie down and rest as much as possible, use astringent washes and injections of raspberry leaf bethroot, and witchhazel. Make an infusion of 1 oz. each to one pint of boiling water. Strain and use three or four times daily. The bowels must be kept regular and the general health must be looked to and restored by tonics.

### **Prolapsus of the Bladder.**

The bladder may be pushed downwards, so as to form a bulging sac in the vagina. This is due to a relaxed condition of the parts and inflammation.

This may occur before or during pregnancy and may then prove a very troublesome complication in labour if the parts are not toned up. Prolapsus of the bladder becomes very troublesome as the patient advances in years. I have seen cases where the bladder appeared at the labia. It can easily be diagnosed. It is usually a little bluish in colour. When the bladder is full it is rounded and polished, and fluctuation may be felt in it. When the bladder is empty it is soft, wrinkled, and uneven; long standing and much exertion increases its size. Due to the relaxed condition the patient feels a dragging sensation at the stomach. There is inflammation of the parts and a fulness in the vagina. In this condition the walls of the vagina and uterus are drawn down. The patient must lie down as much as possible, use astringent washes and injections such as witchhazel, bethroot oak bark, as before mentioned.

While lying down in the prone position, with limbs elevated, gently and carefully push the bladder to its place, insert a pad made of cotton wool covered with chickweed ointment and apply fresh each day. This will keep the parts in place, and at the same time help to tone and strengthen the tissues. In time they will gradually retain their position. The bladder and bowels must be kept emptied.

### **Prolapsus of the Rectum.**

Sometimes the lower bowel is pushed forward into the vagina, often due to habitual constipation, carrying before it the posterior vaginal wall, resembling a vaginal cystocele. The walls become relaxed, and the rectum is distended with feces and pressed anteriorly and downward into the vaginal canal. The tumor varies from a slight projection into the vagina to the extension of it into a tumor projecting between the labia.. All the walls being relaxed, it drags the uterus and other organs downward to a place of least resistance. This condition is often caused by the use of drastic cathartics, or it may be due to enlarged or displaced uterus, which by pressure on the rectum prevents its evacuation, giving rise to fecal accumulations and distension of the rectal and vaginal walls. It may be caused by an entire or partial rupture of the perineum, the sphincter muscles remaining entire. The rectum losing its support anteriorly, as there is not sufficient power in the perineum to antagonise the action of the sphincter, the anterior part of the rectum is forced into the vagina until it meets with sufficient resistance to overcome this contraction.

The patient feels much the same symptoms as in the other variety of prolapse, weight in the vagina, uneasy and dragging sensation in the abdomen, bearing-down feeling, uneasiness and pain in walking, habitual constipation, with difficulty in passing the feces, and a mucous discharge from the vagina. The action of the urine on the tumour and the friction produced by exercise give rise to excoriation, and often to inflammation as the case advances and where the patient is feeble and broken down in health.

The general health should be restored, and the local conditions treated. First reduce the tumour by unloading the bowels with an injection once or twice daily, using medicines that act mildly on the bowels. Diet should consist of brown bread, fruits, nuts, vegetables, and salads. If there are any uterine displacements they must be removed. Use tampons of cotton wool covered with chickweed ointment, same as for prolapse of bladder.

### **Fissure of the Anus.**

This is usually an ulceration at the anus, situated partly without and partly within the rectum. This may be caused by constipation, piles, and prolapsus uteri, etc. This condition is very often overlooked, because the patients think they have piles, either external or internal. The bowel movements are very painful, the pain increasing and lasting for sometime after each movement, while in piles the pain diminishes, there is usually a quantity of blood lost, and a slight discharge of matter. As the ulcer increases in size, the symptoms are more marked. By examination this condition can be easily recognized.

### **Fistulas.**

Sometimes these occur, and are very annoying. Genital fistulas are abnormal avenues of faecal or urinary discharge, by means of which some portion of the urinary tract or the bowel communicates with the genital tract or the exterior of the body. There are several varieties, namely, vesicovaginal, urethra-vaginal, ureterovaginal, vesico-uterine, uretero-uterine, and vesico-uterovaginal. The VESICOVAGINAL is the most common. This consists of an unnatural opening between the bladder and the vagina, through which there is an involuntary passage of urine, which is a very annoying and distressing condition, keeping the patient confined to her home. The passage of the urine through this opening causes a continuous irritation of the mucous membrane and of the vulva, and excoriation and pruritus, accompanied by an offensive odour. As fast as the urine is secreted it passes down the sides of the bladder and escapes.

This condition is usually caused by the long impaction of the head of the child in the pelvis during labour. The front part of the vagina being subjected to long, continuous pressure, may be the seat of inflammation which may terminate by sloughing or ulceration, and perforation. It may be caused by the careless or improper use of instruments to effect delivery. The long and continued use of a pessary in the vagina causes inflammation, ulceration, and perforation where cleanliness is not practiced. Again retention of the urine during labour is very injurious, and later causes this trouble. Disease of the uterus or vagina or venereal ulcerations may be predisposing causes.

*Treatment.* The general health must be restored. Remove any diseased condition in the vagina or genital organs by astringent washes and tampons, as described for previous cases. Cleanliness is the first requisite.

#### RECTOVAGINAL AND RECTOLABIAL.

Rectovaginal is the most common. It consists of an unnatural opening between the vagina and the rectum, which gives passage to involuntary discharge of flatus and faeces. It is caused by a sloughing due to necrosis of the tissues, produced by long-continued pressure during labour. It may be caused by forceps or laceration, long use of pessaries, pelvic abscess, corroding ulcer, cancer, or venereal disease. If the opening is large, the escape of faecal matter over the edge of the fistula and through the vagina keeps up a constant irritation, which generally runs into severe erythematous inflammation at the same time affecting the general health of the patient.

#### URETHRAVAGINAL FISTULAS.

This occurs as a result of injury and pressure during child birth, as described in former cases. The opening in this case is between the vagina and urethra. Another fistula is found where the opening extends from the uterus into the bladder. The causes are all the same. Treatment as before.

#### **Prolapse of the Urethra.**

This occurs to a slight extent in many women who have borne children or have had inflammations of these parts. Often the protrusion is marked, and leads to a carbuncle at the end of meatus or growth, usually papillary in form. It may have an entrance of the urethra. This is a distinct, new narrow pedicle or broad attachment. It is very sensitive, and causes severe itching and pain, and is often very annoying. Strict cleanliness with astringent washes every time the patient urinates, will relieve the patient a good deal.

#### **Urethritis.**

Urethritis.-Inflammation of the urethra. May be due to colic or bladder and kidney irritation. The parts become swollen along the urethra from the bladder. Urine is scanty, scalding and painful. Let the patient drink slippery elm or marshmallow tea every two hours; bathe the parts with marshmallow, and apply applications of the same. Urethritis may be caused by injury at child-birth, or it may be due to gonorrhoea, syphilis, tuberculosis or injuries. Again inflammation of the kidneys and bladder may extend to the urethra, the scalding acid urine keeping up a constant inflammation and irritation, accompanied by a constant desire to urinate, which makes life very miserable. Paralysis of the sphincter muscle may develop, causing incontinence of urine. Here tonics and treatment to suit the condition are required.

#### **Rectal Diseases.**

The rectum is the lower segment of the alimentary canal, and extends from the sigmoid flexure to the anus. It passes from opposite the left sacro-iliac synchondrosis to the right, near the middle of the Sacrum, where it descends in the median line of the anus. Because of its peculiar function, it frequently becomes diseased. There is little doubt that the upright position is the predisposing cause of hemorrhoids, because a large amount of blood is thrown upon the valveless veins of the rectum.

The most common cause of haemorrhoids is constipation, induced by irregularities in sleeping, eating, exercising, and in not attending to the calls of nature. Fissures are usually the result of constipation causing a tear in the mucous membrane during the passing of hardened faeces. Ulceration may be caused by the pressure of the faecal mass on the blood vessels. Hemorrhoids

are either due to some pressure interfering with the return flow of blood, to straining coincident with their expulsion. Prolapsus and invagination are of frequent occurrence in constipated persons on account of straining and the dragging down of the bowel by the faeces. The mucous membrane of the rectum is very fragile, and is occasionally injured by the faecal concretions sufficiently to set up an inflammation which may confine itself to the rectum, or extend into the surrounding tissue, causing ischio-rectal abscess and fistula. Neuralgia of the rectum may accompany constipation, and is caused by the nerves being caught between the bony structures on the one hand, and a faecal mass on the other.

Strong drink and other forms of dissipation are responsible for many rectal ailments, and cause haemorrhoids to become worse, as does the continued use of purgatives, owing to the straining and irritation of the mucous membrane induced by them. Chronic diarrhoea may cause a prolapsus, ulceration, or haemorrhoids, on account of the frequent stools, tenesmus, and passage over the sensitive membrane of irritating discharges.

Thread-worms, pediculi, and anal eczema often start an itching about the anus which is difficult to arrest. Foreign bodies reaching the rectum by way of the mouth or anus often cause suffering.

Many injuries of the rectum follow the frequent and careless introduction of the syringe nozzle by persons in the habit of taking enemata. The large rectal veins in passing from without the bowel to the mucous membrane within, go through muscular buttonholes. It is believed by some that frequent muscular contraction around the veins results in their enlargement below, resulting in piles.

Occasionally, the internal and external sphincters become hypertrophied and irritable due to the pressure of the faecal mass and thus interfere with defecation, or cause much pain by their frequent contractions.

Inter-pelvic diseases of women may disorganize the function of the rectum, such as pressure upon the rectum by means of a displaced uterus or ovary, or of a tumour, and the extension of inflammation, causing adhesions to the rectum, or of any part of the gut to another.

### **Growths or Neoplasms of the Rectum and Anus.**

The rectum and anus are the seat of new growths as frequently as other parts. Adenoma (polypi) are found more frequently in the rectum than in any other part of the intestinal canal. Benign or simple adenomata are common in childhood, and rare in adults.

On the other hand, malignant adenomata usually attack those of middle life, and are rarely seen in children. All rectal tumours have a tendency to become pedunculated, because they are dragged down daily by the faeces. Polypi are growths having a narrow or pedunculated laminar attachment, with a large, movable, pendulous extremity. There are two kinds, soft and hard, and they vary from the size of a pea to that of an English walnut.

### **Lipoma.**

Fatty tumours are occasionally met with, and are similar to fatty tumours in other localities. Fibroma papilloma, angioma, dermoid cysts, and retention cysts are not uncommon on the inside and outside of the rectum and anus. Malignant growths are common in middle life, less common in old age, and rarer in childhood and are dangerous to life.

### **Haemorrhoids.**

Haemorrhoids are vascular tumours of the mucous membrane of the rectum, the anus, or both. They may be external or internal. The external are covered by integument, and the internal by mucous membrane.

Tumours, covered in part by skin and in part by membrane, are known as combination piles.

The larger rectal veins pass through the rectal wall by means of little slits. It is believed the return flow of venous blood is impeded by the contraction *of* the muscular fibres around them, and for this reason these little slits or buttonholes are an important factor in the causation of haemorrhoids, though there are other factors that play a much more important part because of gravitation, and the fact that the rectal veins have no valves. The erect position assumed by man has a great deal to do with the production of enlarged veins. Again, the faeces by the time they reach the rectum, are solid, and frequently cause venous obstruction. Certain obstructive diseases of the heart and liver, a retroverted uterus, stricture of the rectum, or urethra, chronic diarrhoea, cause piles, etc. Anything that forces an abnormal amount of blood into the rectum, or interferes with its return therefrom, may be regarded as a cause.

#### **External Haemorrhoids.**

External Haemorrhoids are of two kinds. When composed of hypertrophied folds of skin, they are called cutaneous; when filled with 80 firm dark clot, thrombotic. The first are usually chronic, and are the colour of the skin: the latter kind come on suddenly, have a bluish tint, and look like a bullet beneath the skin, and produce a sensation of fullness about the anus. When inflamed, a smarting is felt, and when relief is not to be had, the sphincter becomes irritable and the suffering is materially increased by its frequent contraction.

#### **Internal Haemorrhoids.**

There are two varieties, capillary and venous. The capillary are supplied principally by the superficial vessels of the mucous membrane, the venous by the veins of the mucous and sub-mucous tissues. Capillary piles are broad, flat tumours that bleed readily and look very much like strawberries. Venous piles are of frequent occurrence and are composed of dilated veins.

They may be small, may remain within the bowel and bleed freely, or they may be large and protrude and may bleed occasionally.

The patient may feel a protrusion all or part of the time or a sensation in the rectum as if there was something in the bowel that ought to come away, while the intermittent pain may be light or excruciating, according to the inflammation. Bleeding varies from a small to a large amount. There is generally a spasmodic contraction of the anal sphincters. The patient becomes very nervous and loses flesh. When the piles are ulcerated there is more or less eczema caused by the discharge.

*Treatment.*-Find out the cause and remove the same, if possible. Correct the diet by eating nonirritating substances. Avoid purgatives, eat vegetables, fruits, nuts, brown bread, lean mutton, raw salads; avoid stimulants, such as alcoholic drinks, and coffee. Mr. Hool, of Bolton, recommended the following herbs :-

Bur-marigold	1 oz.
Yarrow	1 oz.
Ground Ginger	1/2 oz.

Mix. Boil in 4 quarts of water down to 2 quarts; strain, add 3-lbs. of molasses, and drink one teacupful every two hours until the bowels move freely. Then take it four times daily. This will tone and strengthen the bowels and at the same time help to tone the rectum.

For bleeding piles use strong astringent injections of the following in small quantities in the lower bowel :-Bur-marigold, Witch Hazel, Chickweed, and Comfrey. Also wash the parts after each movement with this solution. This will be found beneficial. At the same time drink medicine as recommended by Mr. Hool. All protruding tumours must be reduced before strangulation has occurred. Patients should keep, off their feet and rest as much as possible.

I have known patients eat Irish moss each morning, before breakfast, with benefit. Take a saucer of moss, add enough boiling water or milk to moisten, and eat slowly.

Others have eaten bran in the same way with success. Some have taken one dessertspoonful of good molasses in half a cup of hot water before breakfast with good results.

I have also known of good results by the taking of a cup of hot water' in which one teaspoonful of salt was dissolved. This must be sipped very slowly, at least one half-hour before breakfast. This is also good in catarrh of the stomach, as it cleanses and at the same time helps the peristaltic action of the bowels. These cases can be helped by assisting Nature, as Nature is the best doctor.

Dr. Samuel Thomson, of America, says rye and maize bread is an excellent remedy. Let it be constantly used for a time, and for a change, if necessary, substitute the bread made from whole wheat meal.

Another good remedy, he says, is a greening apple, to be eaten after each meal. This will keep the bowels in regular order longer than any kind of preserved fruit. He claims, the most natural animal physic is beef gall. Take 1 quart of beef gall, put it into a glass bottle of 3 or 4 gallons capacity, then add 1 gallon of the best Hollands gin, and 1 gallon of the best sugar or molasses. Shake it well together and flavour it with Pennyroyal. This is an excellent corrector of the digestive organs. and well calculated to remove constipation of the bowels and restore their natural action. Take from a half to one glass night and morning. He claims it will correct the digestion and remove the costive state of the bowels, by which means the appetite is sharpened, the circulation quickened in the extremities, and the nervous system strengthened.

### **Diseases of the Kidneys.**

The kidneys are situated one on each side of the spinal column just at the region where the last ribs join the spine, in the small of the back. The kidneys cannot be felt, except when lying down on the back. Affections of the kidneys sometimes cause pain in the back or in the neighbourhood of the kidneys, or are associated with sharp pain running down the front of the kidney into the groin.

In some instances kidney diseases are not accompanied by pain. Kidney trouble is generally well developed before it is found out.

The function of the kidneys is to drain from the blood certain elements of that fluid which are no longer required ; they also act as a filter for the body and separate from the blood waste material. This matter is washed out and escapes in the form of urine. This fluid excreted by the kidneys flows down a membranous tube, about the size of a goose quill, called the ureter, and is thus emptied into the bladder.

The kidneys are subject to many diseases and changes. Congestion of the kidneys is due to increased pressure in the arteries, as from hypertrophy of the heart, or to obstruction of the venous circulation. The first cause brings about an abundant secretion of urine; the second scanty, high-coloured urine.

Acute inflammation of the kidneys involves, chiefly, the small urinary tubes, which become blocked causing suppression of the secretion of urine. It occurs very frequently in fevers, commonly a result of exposures to cold. Chill is followed by fever and sharp pain in the region of the kidneys, frequent urination, or suppression of urine; urine opaque, bloody, or of a dark or dirty brown colour. Dropsy changes from one part of the body to another, as from the face to the feet and ankles, or the reverse. There will be pain and tenderness in the small of the back, sometimes extending to the groins and bladder, with headache and feverishness.

Give the patient strong infusions of Pleurisy Root and Marshmallow, apply hot fomentations over region of kidney and keep on a light diet.

Haemorrhage from the kidneys cannot always be positively distinguished from haemorrhage of the bladder and other parts of the urinary organs, unless symptoms of suppression of the urine occur, such as nausea, vomiting, or dropsy, as sometimes happens in consequence of the blocking of the tubes of the kidneys by clots.

As a general rule, clots are more frequent and abundant in haemorrhage from the bladder than in haemorrhage from the kidneys. Bleeding may result from accidents, gravel in the pelvis of the kidneys, congestion, or renal apoplexy. The urine is bloody and coagulntes when heated; bleeding is excited by exercise, and clots in the urine.

### **Movable and Floating Kidney.**

Mobility of at least one kidney, usually the right, is present in more than one-third of all women suffering from pelvic diseases. The terms "movable" and "floating" kidney indicate simply different degrees of mobility. When the kidney is movable to such a degree that it falls as low as the umbilicus, it is said to be floating; when mobility is less than this, the case is one of movable kidney. By examination we find a movable tumour of the size and shape of the kidney, usually felt below the ribs on the right side; pain in the region of the kidney, and a dragging sensation across the abdomen, with palpitation of the heart and nervous headache. The organ can be returned to its normal place and kept there by pads and a natural abdominal supporter. Strengthen the kidney by tonic medicines; and build up the general condition of the body.

### **Stone in the Kidney, or Gravel.**

This is an exceedingly painful affection, and may easily be mistaken for ordinary colic, or the passage of gall-stones. Gravel originates in the kidneys, sometimes passing through the ureters to the bladder.

Symptoms: Small concretions and brick-dust sediment are passed in the urine. There is a sharp pain in the kidneys, and acute pains dart from the kidney to the bladder and down the thigh. There is a great desire to pass urine, with no effect. The attack may last for half an hour or longer, then cease. Vomiting with severe headache occurs, then ceases until the next attack. Apply hot fomentations or Flaxseed poultices and give hot tea every two hours made from Marshmallow, Wild Carrot, and Parsley Piert, in equal parts, using 1 oz. to one pint of water.

### **Uraemia.**

This is an infection due to the accumulation in the blood of waste material or body poisons, which should be thrown off by the kidneys. The poison may be carried through the blood or along the urinary tract, or through the lymphatics, by contiguity. It is common in females, often occurring during child-birth or as the effect of severe constipation, peri-renal abscesses due to appendicitis, or infection from the gall-bladder.

### **Abscess of Kidney.**

This cannot in all cases be distinctly distinguished from other affections of the kidney and its region.

After a time a lump is found about the region of the kidney accompanied by severe pain in the small of the back, shooting pains in the thighs, ureters, and bladder. It is increased by pressure. It begins with a chill, followed by fever, vomiting, scanty and high coloured urine containing pus and blood. Fomentations must be kept over the kidneys. . Give Compositio Yarrow, and Peppennint to produce copious perspiration, and let the patient drink freely of distilled water.

### **Cystitis.**

This is due to some infection or inflammation in the kidney extending down the ureters to the bladder from pelvic inflammation, or from contiguous parts.

The severity of the symptoms varies greatly. There may be frequent and painful urination, changes in the character of the urine; or pain may be felt deep in the lower part of the abdomen. It is often of a burning or smarting character, and accompanied by loss of appetite, derangement of digestion, and debility. Hot sitz baths, and Marshmallow or Slippery Elm drinks, will help relieve and heal the mucous membrane. Treatment :-Marshmallow, Comfrey, Cornsilk, Parsley Piert, Wild Carrot, Yarrow and Gravel Root-each 1/2 oz. Boil 1 oz. in one pint of water for 10 minutes. Strain and drink one wineglassful four times daily.



### **Irritability of Bladder.**

This is very common, and is due either to neglecting to relieve the bladder, or to acid urine, which causes straining after urination.

### **Spasms of the Bladder.**

This may be due to nervous troubles, and occurs in nervous and hysterical women. There will be incontinence or retention of urine; a desire to pass urine, but inability to do so; violent pain, with intervals of complete relief. The spasms may extend to the rectum. Use same treatment as for inflammation of bladder, combined with nervines.

### **Peritonitis.**

Inflammation of the peritoneum, or membrane which lines the abdominal cavity and covers all the pelvic viscera. The ligaments supporting the uterus are formed of folds of this membrane; also the covering surrounding the uterus. Peritonitis is a not infrequent accompaniment of the various inflammations of the womb itself, the inflammatory process extending from this organ into the tissues around it, and which may easily spread to other parts. If the entire membrane is inflamed, the disease is one of the most dangerous affecting the body, and usually results fatally; but if only a portion of this extensive surface becomes inflamed, the patient may escape without serious consequences.

The most common causes of this most serious trouble are usually secondary to an inflammation in some one or other of the abdominal organs, most frequently to the inflammation of the womb which occurs in child-birth. Sometimes disease of the intestines, attempts at abortion, imprudence during menstruation, inflammation of the womb or ovaries, injuries from instruments, or coition will cause peritonitis. It is often spoken of as puerperal septicaemia, as it is contagious; that is, it can be conveyed to other women during delivery by the hands of a nurse or physician. It may be due to sudden fright or great nervous excitement, over-exertion, or injudiciousness in various ways soon after or during delivery.

The symptoms vary according to the severity and location of the case, as well as the previous condition of the patient. There is frequently a pronounced chill followed by high fever; pain and tenderness in the lower part of the abdomen, aggravated by movements of the body. Sometimes nausea and vomiting occur.

In other cases the onset of the illness is more gradual. It usually commences suddenly with a chill of varying intensity, starting by a mere shivering and increasing to a violent shaking followed by a rise of temperature. The countenance becomes pinched and carries a look of agony, and there is general restlessness. The bowels are constipated, the abdomen swells rapidly and becomes enormous and tender; the least movement or noise causes severe pain. The patient lies on her back with the knees drawn up.

Treatment should commence as soon as the first symptoms manifest themselves; delay is fatal. First get the patient to perspire freely. If constipated, give injections to the bowels. Place over abdomen hot fomentations of Smartweed and Mullein Leaves, Flaxseed and Red Pepper. Give internally a tea made from a strong infusion of Pleurisy Root and Ginger, with a little Tincture of Myrrh and Lobelia added. Liquid food only must be given until the patient is well on the way to recovery.

Healthy women need have no fear of a tedious or painful convalescence if they will drink tea made from Raspberry Leaf three or four months previous to confinement. The patient is enabled to endure what might otherwise prove severely exhausting. The Raspberry Leaf tea strengthens and cleanses the female organs and helps Nature to work in a more easy and harmonious way.

### **Puerperal Convulsions.**

This is a most serious condition, occurring about the time of delivery or confinement. The convulsions may occur during the last three months of pregnancy.

The feet swell continually, and there is a pain in the top of the head and back. Often derangements of vision and of hearing, and pain in the abdomen are experienced. Before a fit the pain in the head becomes intense, the convulsion itself throwing the body into the most violent contortions. After its subsidence the patient remains stupid. If the patient's health is seriously impaired, it may be necessary for the physician to induce labour in order to save the life of the mother. If the paroxysms occur just before delivery there is no need for anxiety. The urine must be examined during the period, and the patient given kidney medicine, together with Raspberry Leaves. Keep the patient perspiring freely and regulate the bowels.

### **Milk Leg.**

An inflammation in some of the large veins and lymphatics leading from the thigh into the trunk. All a result of the obstruction to the return of blood from the limb, there occurs a swelling, often of enormous extent, causing a peculiar, pearly-white hue of the skin. It is called Milk Leg on account of this colour of the skin, and from the fact that in this, as in the other affections of child-bed, the milk is often suppressed.

The disease may occur at any time during the first month after delivery. It usually begins within ten days. There is a feeling of weight in the pelvis and pain in the groin or hip. There is a severe chill, followed by fever, after which the swelling begins in the groin and progresses down the leg. Within a few days the entire limb is white and swollen, and feels, as patients often say, as if it wore a wooden leg. It is due to some infection at child-birth carried into the veins by the lymphatics.

It is a very painful and troublesome affection, fortunately rarely fatal. With proper treatment and rest, the limb usually resumes its original size and proper functions. The limb must be kept elevated, and bandaged with flannel.

### **The Sympathetic Nervous System and the Relation to Different Diseases. Breasts.**

The breasts are accessory to the organs of generation, the purpose being to supply nourishment to the infant from the time of birth until the teeth are sufficiently developed to masticate solid foods.

The entire sexual system is abundantly supplied with blood vessels and nerves, which build up the waste tissues in health, warn us of danger in case of disease by reflexes from the uterus to the breasts, through the sympathetic nervous system and ganglia connecting the abdominal brain. For example, the breasts or mammary glands are connected to, the abdominal or pelvic brain by three distinct routes. (1) By the nerve plexuses accompanying the mammary arteries and subclavian arteries, then direct to the abdominal brain; (2) by the nerve plexuses accompanying the intercostal arteries to the aorta and its brain; (3) by the nerve plexus accompanying the epigastric superior and inferior arteries to the common iliac, whence the route (plexus) follows the artery of the round ligament to the plexus uterina, whence the route is direct to the pelvic brain and uterus,

By stimulating or irritating the nipple with light friction, massaging the breasts, the abdominal brain is reached by these three routes. Result: the uterus is induced to contract more frequently. Again, the uterus can be stimulated to more vigorous contractions by drinking hot fluid, which transmits the stimulus over the gastric plexus to the abdominal brain, where it is re-organised and sent directly to the uterine plexus, which incites the uterus to increased peristalsis.

Through the sympathetic system, reflexes are carried from the uterus to the breasts by the channels or plexus mentioned. Always where there is inflammation in the uterus or womb, such as endometritis (inflammation in the lining of the uterus) or parametritis (inflammation on the covering of the uterus), or ovarian trouble the breasts will be tender to touch and sometimes inflamed.

The same condition is seen in young girls at puberty, as the female organs develop and grow. The breasts are very tender and sensitive; they often become large and painful, caused by sympathy with the genital organs. Very often women complain of painful breasts, and treat them for breast conditions, while the real cause is in the pelvic organs. First treat these organs and remove the cause, then the breast trouble will disappear.

Again, we have disturbances in the digestive tract from uterine changes, through the sympathetic system. Chronic uterine disease will produce remote malnutrition and reflex changes. Take, for example, a case where the digestive tract is deranged on account of pregnancy. In the first place, vomiting arises from trauma, i.e., stretching of the uterine nerves by an expanding foreign body (embryo) and the dragging of the neck of the uterus on to the neck of the bladder. This dragging or pressure on the neck of the bladder disturbs the spinal and sympathetic nerves massed there. The irritation is carried up the hypogastric plexus to the abdominal brain. When the irritation arrives at the abdominal brain, the force is reorganised and sent out on the various nerve plexuses which radiate from the nerve centre. If the force is emitted along the gastric plexus, which is probable on account of its large size, the stomach receiving sympathetic nerves from the three branches of the celiac axis will suffer, and, vomiting is likely to occur. If the troubles of the stomach resulting from reflex disturbances from the uterus by the way of the hypogastric plexus be studied anatomically and physiologically, it may be considered that the stomach is affected' in two distinct parts; first, its muscular wall (Auerbach's plexus); second, its glandular or secretory apparatus (Meissner's plexus). When the irritation from the generative organs travels up the hypogastric and ovarian plexuses to the abdominal brain, it is then reorganised and emitted along the gastric plexuses to the automatic gastric ganglia known as Auerbach's plexus. It affects Auerbach's plexus first because it there first meets it in the muscles. The result of the irritation of Auerbach's plexus is irregular action of the muscles of the stomach-nausea or vomiting.

When the irritation goes farther along the gastric plexus it meets Meissner's plexus, which lies just beneath the mucous membrane and controls gastric secretion. If Meissner's plexus is considered irritated it may cause excessive or deficient secretion of the fluids or the fluids may be secreted in disproportionate quantities. The result will be indigestion and fermentation, causing the development of gases.

The reflex irritation from the uterus may be of such a nature that Auerbach's plexus may be insufficiently stimulated, causing paresis of the stomach wall; or the Meissner's plexus be so little stimulated that it will not secrete sufficient gastric fluids. The track of the nervous irritation is definitely from the generative organs, through the hypogastric plexus, to the abdominal brain where it is reorganised and emitted to the various viscera. This explains how uterine diseases create stomach trouble, and vice versa.

It may be noticed in some cases of violent vomiting that digestion and nourishment are quite good. The above shows that Auerbach's plexus is the main one affected (muscular), while Meissner's (glandular), the one which really digests the food, is not much affected.

In such cases it does not matter what disease of the generative organs there is, if irritation arises and is reflected to abdominal brain, inflammation, tumours, or the local manifestations of the menopause, will act similarly, according to the degree of irritation.

The reflex irritation of the abdominal brain will cause Meissner's plexus to secrete (1) too much secretion (diarrhoea) (2) too little secretion (constipation), or (3) disproportionate secretion (fermentation). The same thing will occur in any secondary organ-i.e., too much, too little, or disproportionate secretion.

A woman who has a lacerated cervix of the uterus (result child-birth) will go through various stages for years, and end in being a confirmed neurotic. The first stage is irritation from the endometrium, due to infection from the laceration of the cervix and perinium.

The second stage is indigestion, as a result of the long-continued irritation arising from the genitals and passing up to the abdominal brain, and on to the Meissner and Auerbach of the digestive tract. The third stage is malnutrition, due to the long-continued indigestion. The reflex irritation goes on continually. The fourth stage is anaemia, resulting from the indigestion and malnutrition, hence a general breakdown of the whole system. The fifth stage is necrosis, which is due to the nervous system having been bathed in waste-laden blood for years,

The liver is very often disturbed by disease of the generative organs (acute or chronic), through the sympathetic nervous system, as this organ is highly supplied with sympathetic nerves. Irritation starts from a diseased pelvis and travels up the ovarian and hypogastric plexuses to the abdominal brain. Thence the irritation is reorganised in the abdominal brain and emitted along the hepatic plexuses. The automatic hepatic plexuses are unduly and irregularly stimulated at times of activity and rest. The result is that the rhythmical function of the liver is deranged, resulting in the destruction of bile, glycogen, and urea. In a normal condition, the liver is induced to perform a rhythm by its automatic plexuses, made by the elasticity of its capsules. The rhythm is made up of two distinct stages—a time of activity or expanding, and a time of repose or contraction.

Chronic disease of the pelvic organs will excite impulses which travel to the abdominal brain, directing them to the liver at such uncertain times that the liver never performs its activity nor rest, without a more or less attempt to induce irregular rhythms. The final result is that the rhythm of the liver is disturbed and that the cell-products of the liver are formed irregularly. Bile, glycogen, and urea are formed excessively, deficiently, or disproportionately, and end in malnutrition. The skin is yellow and sallow, and the urinary products are abnormal.

Disturbances of the liver are very common during pregnancy and menopause, as just described, and frequently induce liver disease, owing to reflex irritations.

The heart, too, is affected in pelvic diseases. It has very manifest peripheral sympathetic ganglia, and is largely under the control of the sympathetic nerve. When the pelvis contains diseased generative organs, the irritation arising travels up the ovarian and hypogastric nerves to the abdominal brain. From the abdominal brain two roads lead to the heart. One road through the great splanchnics to the cervical ganglia, and, as the ganglia act as little brains, the force is here reorganised and sent directly to the heart. Of course, all irritation comes irregularly so as to disturb the heart's rhythm. But spinal or cranial nerves prohibit rhythm, so that the main forces from the abdominal brain travel up the pneumogastriacs to the fourth ventricle, and the irritation is thus reflected directly to the heart. Irritation, especially that coming along a cranial nerve, quickly affects the rhythm in any viscus. In like manner, irritation from diseased generative organs may reach the heart by first going to the abdominal brain and then through the splanchnics to the pneumo-gastriacs and to the heart.

As a result the heart palpitates and beats irregularly, and this is very common in female diseases. Palpitation is most manifest at the menopause or change of life. In pregnancy the heart prepares for the emergency by thickening its walls, and is generally no worse for undergoing the extra work incident to gestation. But if there be a tumour in the pelvis, which is continually emitting irregular reflexactions, and disturbing the rhythm of the heart, then sooner or later it is weakened and degenerated. There is no organ so manifestly affected in the menopause, as the heart.

The heart palpitates at menopause because the accumulated energies of the abdominal brain find an easy outlet through the splanchnics and pneumogastriacs. The menopause often requires several years for its completion, so that the abdominal brain can get accustomed to controlling and distributing the accumulated energies which were once expended in the menstrual rhythm.

For these reasons women passing through the menopause which is the most critical time of a woman's life, should take life quietly, free from worry and care, otherwise they will end their days as nervous wrecks. A woman who is fortunate enough to pass through these changes with little worry, work, or anxiety, should live to a ripe old age.

The same kind of reasoning is applicable to the spleen. Diseased generative organs reflect their irritation to the abdominal brain and then to the spleen. Irritation always proceeds irregularly, disturbing the rhythm of the spleen, thus creating malnutrition, and showing its disturbance by pigmentary deposits in various portions of the body.

In the sympathetic nervous system the kidneys play a vast and immeasurable role. The uterus and kidneys have the highest nerve and blood supply of all the abdominal viscera. The nerves of the urinary tract pass from the abdominal plexus, which are solidly and compactly anastomosed with each other and with all the abdominal sympathetic plexuses, thus connecting the urinary tracts intimately and profoundly through the nerve plexuses with all the other abdominal viscera.

The kidneys, uterus, ovaries, and oviducts develop from two very small points in the embryo called the Wolffian bodies. These develop from the mesoblast, as do the muscles, blood and lymph vessels. In this way the kidneys and genitals have an intimate and close connection. The abdominal brain sends out a vast chain of nerves to the kidneys on each side, and the same to each side of the genitals in male and female. Diseases in the genitals, whether tumours or inflammatory processes, produce in the urine not only diminished solids, but also diminished fluids. Again, on the other hand, diminished kidney excretion produces diseased or at least disturbed genitals. Very often I have noticed in women with diseased genitals and deficient renal secretion, that by giving diuretics in small and oft-repeated doses, the diseased genitals will often improve. Diseased genitals irritate the kidneys by reflex action. This is accomplished through the abdominal brain.

If by some irritation in the pelvis or abdominal brain the kidney begins to secrete insufficiently, the whole organism, together with the ganglionic nervous system, will become poisoned from non-elimination. Due to this peculiar reflex action of which the abdominal brain is capable, disease of the pelvic organs may be cured by diuretics, diaphoretics, or cathartics. Effective diuretics relieve many pelvic pains. Baths and diaphoretics subdue many neuralgias, and cathartics disperse dragging pains.

A woman may have a sound kidney, so far as chemical examination of the urine may indicate, and yet reflex action from the genitals may induce it to secrete deficient or excessive fluid or solids, which not only further disturbs the genitals with was laden blood, but disarranges the fine balance in other viscera, as well. Wherever this waste-laden blood proceeds, it produces no points for reflex irritation, unbalancing the whole system. During menstruation girls show distinct clinical symptoms of pain in the region of the kidneys, and of variation in urinary secretion, showing the close relation between these and pelvic disturbance and that this pain in the kidney region is due to reflexes from the menstrual organs, the uterus, and oviducts.

Very often abdominal tumours are followed by kidney disturbances which are chiefly chronic, and are due to reflex irritation.

### **Floating or Movable Kidney**

called Nephroptosis, is an excessive renal mobility. The kidney is a mobile organ, not absolutely fixed. It moves with respiration, perhaps for a range of half an inch or so. The causes of movable kidney are many:-Lowered vitality, rapid loss of perineal fat, rapidly-repeated gestations, hereditary degenerative debilitating diseases, and yielding of diaphragmatic supports. Women with relaxed abdominal walls frequently suffer most. The renal secretion may be deficient, excessive, or disproportionate. The patient complains of nausea, vomiting, and dragging pains. She gradually becomes neurotic from reflexes due to trauma on the renal plexus.

Treatment, : Build up the general health, attend to diet, stimulate peristalsis in the bowels, and apply massage. Assume a recumbent position as much as possible, as it relieves the symptoms, and aids in curing by inducing the kidneys to persist in their normal function. Abdominal binders or corsets, made to individual measurements, should be applied while in the prone position and removed for the recumbent position. A suitable pad may be made to keep the kidney in place.

### **Intestinal Troubles.**

The bowels are lined by a mucous membrane and covered by a serous or peritoneal membrane. The arterial supply is carried from the celiac axis to supply the small intestines, the ascending colon, and the transverse colon; the inferior mesenteric to the descending colon, sigmoid, and rectum-in all, three segments supplied by three arteries. The nerve supply to the intestines proceeds from three sources-1, The cranial nerve, or the pneumogastric; 2, the spinal nerves, especially those entering at the distal and proximal bowel segment; 3, the sympathetic system.

The nerve supply of the bowel consists of a mixed supply of the cerebro-spinal and sympathetic.

The rhythmic, periodic movement belongs to the sympathetic nerve, so that whatever inhibition of motion may reside in the bowel wall, it is dominated by the sympathetic nerve, like all other abdominal viscera.

The peculiar peristaltic movements consist of a contraction and dilatation of the bowel lumen, the direction being towards the anus.

Another form of bowel movement may be called the pendulum movement. This is a contraction and elongation of the longitudinal muscular layer, which does not propel the contents anteriorly. The lumen of the intestines remains the same.

A third kind of bowel action is described as roll motion. This causes those peculiar gurglings which every individual occasionally experiences. This may be due to the irregular action of the nerve supply. Yet there is no pain.

All bowel motion of any distinct type belongs to the small intestines.

Perhaps one can scarcely ever observe the large bowel motion through the abdominal wall, if it be in a truly physiological state.

Anaemia of the intestines lessens peristalsis, while hyperemia increases peristalsis. Chemically different substances will create bowel motion according to their deviation from the normal bodily temperature. It must be remembered that over-distensions make contractions impossible; tympanites is paralyzed just exactly according to its degree of distension. Tympanites is accompanied by slight peristalsis, but the pain is due to local spasm, especially of the circular muscles.

Excessive or irregular bowel peristalsis is observed among hysterical and neurasthenic persons. It is recognized by gurgling splashing, or rumbling noises in the abdomen. It arises in nervous persons, yet they generally suffer no unpleasant sensations, except the mental annoyance. The rumbling noise has no especial connection with meal-times or drinking. If it occurs in women is apt to be more active at the menstrual time. Mental influences seem to play a part, for when the subject works or directs the mental energies away from the phenomenon, the gurgling generally ceases.

### **Tumours in relation to the Sympathetic System.**

It is well known that shortly after the appearance of a tumour in the abdomen the health of the patient becomes more less deranged. The heart suffers from abnormal action and structural change, and digestion becomes more or less deranged. As the tumour increases in size, kidney diseases generally develop. The liver, forming bile, glycogen, and urea, sooner or later becomes impaired in its rhythm. The lungs lose their rhythm and become spasmodic, while the spleen shows its disturbance pigmentary deposits in various portions of the body.

The cause of these disturbances is reflex action on the sympathetic nerve.

The abdominal brain and the three cervical ganglia are points where forces are reorganised and distributed to the viscera. In diseased viscera we find disturbance in rhythm. In uterine myoma, for instance, we find that when a peripheral irritation is sent to the abdominal brain the reorganized forces are emitted along the lines of least resistance so that the organ which is supplied with the greatest number of nerve strands will suffer the most.

### **The Effects on the Heart.**

An abdominal tumour induces fatty degeneration of the heart. When an uterine tumour irritates the peripheral ends, of the hypogastric plexus, the irritation is transmitted to the abdominal brain and there re-organised and emitted along the splanchnic to the cervical ganglia, where again a re-organisation takes place, and the force then passes down to the heart, by way of the three cardiac nerves. The irritation could pass directly from the uterine myoma up the lateral chain of sympathetics to the three cervical ganglia, where it becomes re-organised.

A fatty, degenerated, or weak heart induces low blood pressure, which is the bedrock factor in waste-laden blood and deficient elimination. It allows local congestions and consequent impaired nourishment.

### **The effects of Abdominal Tumours on the Liver in relation to the Sympathetic System.**

This organ does not escape the evil influence of the tumour. Abdominal tumours induce fatty degeneration of the liver, which may be owing to the influence on the hepatic plexus of nerves, stopping all secretion in the liver. The characteristic disturbance which arises from the uterine myoma is a derangement of rhythm. The liver has a rhythm due to (a) an elastic peritoneum enclosing it, (b) an elastic capsule (Glisson's) surrounding it, and (c) the capacity of its cells for enlarging.

The irritation from the periphery of the hypogastric plexus passes to the abdominal brain, where it is re-organised and transmitted to the liver. It goes to the liver from the tumour at intervals of hours, and deranges its rhythm. The second point to consider is the altered secretion of the liver due to the reflex irritation from the uterine myoma by way of the abdominal brain. The continued irritation increases the derangement, and soon changes and impairs the liver nourishment. The complete process from food to other products becomes imperfect, and a lower grade of tissue is formed, known as fat. The constantly irritated liver soon becomes unable to form but little products beyond fat, and degeneration follows.

It is well known that women at the menopause frequently develop liver disease. This is owing to the reflex irritation through the abdominal brain.

The degeneration of the hypogastric plexus will not allow to transmit sufficient physiological orders to the uterus to induce its monthly rhythm, so the accumulated energies flash to the other organs, and the derangement of the liver is especially manifest because its derangement is often followed by pigmentation (yellow, or brown, or black) of the skin; The uterine myoma, then, by reflex action, disturbs the rhythm and secretion in the liver, and its nutrition. This ends in fatty degeneration.

### **Kidneys.**

I have noticed that women with pelvic disorders have disturbed kidney action, and so I treat both together. In general this kidney disturbance is renal insufficiency, and the kidneys may, after long irritation, become organically diseased.

The kidneys, uterus, ovaries, and oviducts develop from the very small points in the embryo called the Wolffian bodies. They develop from the mesoblast, as do the muscles, blood, lymph vessels, and the genito-urinary organs. The abdominal brain, as I have mentioned in a previous chapter, sends out a vast chain of nerves to the kidneys on each side, and the same brain sends out a vast chain on each side of the genitals.

These are only different spokes in the same wheel, the hub of which is the abdominal brain. Diseases in the genitals, whether tumours or inflammatory processes, produce in the urine not only diminished solids, but also diminished fluids.

Again, on the other hand, diminished kidney excretion produces diseased, or at least disturbed, genitals, find that by giving diuretics-in small and oft-repeated doses-the diseased genitals will often improve. 'Diseased genitals irritate the kidneys by reflex action'~ through the abdominal brain. 'The genitals, kidneys, and abdominal brain constitute a very vital triangle. In the middle of its base lies the abdominal brain, and at the apex the important genitals, while the other two angles are occupied by the kidneys.

The uterus and kidneys have the highest nerve and blood supply of all the viscera, hence they experience more profoundly than other viscera the forces which are organised and reorganised in the abdominal brain.

In the sympathetic nervous system the kidneys play a vast and immeasurable role. If by some irritation in the pelvis or abdomen the kidney begins to secrete insufficiently, the whole organism, together with the ganglionic nervous system, will become poisoned from non-elimination. From this peculiar reflex action, of which the abdominal brain is capable, the pelvic organs of women or men may be cured by diuretics, diaphoretics, and cathartics. In other words drain the skin, kidneys, and bowels. the intimate and close relation of the genitals and kidneys is plain anatomically and physiologically, as large bundles of nerves, from the abdominal brain supply both.

Let me here point out the vital relations which exist between deficient kidney secretion and diseased pelvic organs. Effective diuretics relieve many pelvic pains; baths and diaphoretics subdue innumerable neuralgias, and cathartics disperse dragging pains.

A woman may have a sound kidney (so far as chemical examination of the urine may indicate) and yet reflex action from the genitals may induce it to secrete deficient or excessive fluid or solids, which not only further disturb the genitals with waste laden blood, but disarrange the fine balance in other viscera. Wherever this waste-laden blood advances, it produces new points for reflex irritation, unbalancing the whole system.

My tutor, Dr. Byron Robinson, of Chicago, always advocated that such women should drink a full glass of water six times daily, containing a pinch of Epsom salts, but blood purifying herbs are better.

During menstruation girls show distinct clinical symptoms of pain in the region of the kidneys and variation in urinary secretion, showing the close relation between this and pelvic disturbance. It is clear therefore that this pain in the kidney region is due to reflexes from the menstrual organs, uterus, and oviducts.

It is a common observation that abdominal tumours are followed by kidney disturbance. Even the gravid uterus does not allow the kidney to escape irritation. This kidney disease, brought about by abdominal tumours, is due to reflex irritation.

What has been said in regard to kidney disease and reflex irritation is equally true in floating or excessively movable kidney. The effect of dragging movement of the kidney on the abdominal brain, through the renal plexus, unbalances the viscera very distinctly. The patient suffers from nausea, constipation, disturbed secretion and circulation, and from dull, dragging pains,

Abdominal and pelvic tumours produce disease in the digestive tract, through the secreting of glandular organs, because these glands are the most highly supplied with sympathetic nerves.

If the irritation from the tumour be of such a nature as to produce excessive secretion, diarrhoea may result; the excessive secretion will decompose, ferment, and induce malnutrition. It is common to observe in women with tumours, spells of indigestion especially in times of excessive irritability.



No doubt at such times the irritation assumes a prominence not experienced on other occasions.

If the irritation is of such a nature as to diminish secretion, constipation will most likely result.

An inactive digestive tract is the forerunner of non-elimination, and waste-laden blood. The elements which make up the digestive fluid are not secreted in normal quantities: one element is deficient and the other is excessive. The normal relations of acidity and alkalinity are changed, so that constant fermentation arises.

### **Constipation.**

Constipation is an incomplete evacuation of the colon. The causes may be due to inefficient functioning, excessive mental or physical activity, special habits, dietetic errors, diseases of adjacent viscera, impaired peristalsis of the colon, and other factors which induce dryness of the faeces from inefficient secretion or excessive absorption.

The quality and quantity of food and its compositions, are very important factors. Food must possess sufficient variety in quality and quantity, and be ingested at regular intervals. The food should be mixed, and possess sufficient indigestible matter to leave sufficient residue to stimulate peristalsis. Ample fluids at regular intervals should be ingested. For a person weighing 150-lbs. three pints of fluid daily is required to supply the body waste. Foods should possess different ingredients. Carbo-hydrates produce heat and acidity, nitrogenous foods tissue and alkalinity, and mixed foods neutrality of the digestive tract.

Women are more liable to constipation than men, because in them the genital tract is changed periodically, robbing the intestines and colon of their usual quantity of blood. Such changes are puberty, menstruation; pregnancy, and pelvic diseases. Some individuals are constipated from childhood. The nerves often rule bowel evacuation. A change of locality, a railway journey, or change of labour, will cause a constipated condition; as will also depression from disappointment, &c.

The movements of the bowels are largely dependent on the amount of blood in the intestinal wall, and the amount of fresh blood which supplies the nerves.

Peristalsis may be increased in diarrhoea, yet it may be as active in constipation, but in this latter condition, the colonic movements are vain and futile from inability to force the contents into successive new segments. An empty bowel is a still one, a full, bowel is an active one. Also active peristalsis will invite more blood into the bowel wall, which in turn induces active motion in the segments. This is why abdominal massage is so valuable, as will be explained later. Whatever checks the flow of fresh blood to the bowel wall slows peristalsis, and this explains the constipation of anaemia. The main factors in constipation are the blood and food. The formation of the stool depends on the relation of the solids and fluids introduced into the stomach. Water is one of the best adjunct evacuants. An exclusive milk diet may create constipation, because the small residue of solids is insufficient to excite peristalsis through the peripheral nerves. A diet of milk creates diarrhoea, it very likely results from fermentation in the presence of germs. The use of whole wheatmeal bread in curing constipation lies, in the fact that a large indigestible residue remains, inducing colonic contractions: its contained starch invites fluids and excites peristalsis, both resulting in a kind of abdominal massage, and acting like a foreign body to the mucosa.

The habits of life are closely associated with constipation. Sedentary habits, deficient exercise, and excessive mental work tend to produce constipation. The use of narcotics, excessive eating, or excessive ingestions in the gastro-intestinal canal may lead to atony of the intestinal wall and consequent constipation. After constipation has once started, a train of symptoms may set in. Long retention of the faeces allows them to become dry and hard from absorption of fluids. The faeces become pressed into the saccules of the colon, as hard, irregular masses, known as scybala. Such masses by continued pressure may produce mucous ulceration. The patient experiences fullness in the abdomen, and a disagreeable taste arises.

The skin may assume a muddy colour; there may be foul breath, headache, neuralgia, dizziness, sleeplessness, &c. The train of evils resulting from constipation is almost endless, due to auto-intoxication; the faecal masses produce pressure on the returning veins of the faecal reservoir, causing congestion, especially in the rectal veins, which results in haemorrhoids.

*Treatment.*-Find out the cause and remove it. We cannot treat two people alike. We must study each individual case, and treat the conditions present. Diet is first and most important, yet we cannot prescribe the same diet for every person, because what will suit one will not suit another. Oatmeal, wheatmeal or bran bread will leave ample residue to induce peristalsis, which often overcomes constipation. In some cases colonic flushings assist wonderfully. Along with the establishment of a regular time for evacuation. Avoid cathartics, as they cause constipation.

Regulate the diet by taking foods which leave a large residue, in order to establish a constant stimulus to successive bowel segments. The diet should be mixed one of cereals, fresh meats, fruits, nuts, salads, and vegetables. Meals should be eaten at regular fixed hours. The bowels should be evacuated every morning after drinking hot fluid and eating hot food for breakfast, as heat starts peristalsis. The mental state, too, has much influence over the bowels, so that if the mind is fixed or set on: a certain hour for an evacuation, it is almost sure to cause it. Exercise of various kinds is good, e.g., massage twice daily over the abdomen with a rubber ball, first lightly, then more deeply. Follow the line of the colon, from right to left with a circular movement-stroking, rubbing, tapping, kneading, and gripping. This massage needs patience as it must be kept up to accomplish results.

Olive oil taken daily, in tablespoonful doses, is good, but it must be continued in order to get the desired result. The chemical action of olive oil is a result of the separation of the oil by bile and pancreatic ferments.

One teaspoonful of salt in half a cup of hot water, sipped slowly before breakfast, is good in constipation; or one dessert spoonful of treacle in a cup of hot water will also be found beneficial. A glass of cold water taken on rising in the morning will often regulate the bowels in constipation, by stimulating the bile and toning the intestinal tract.

### **INFANTILE PARALYSIS.**

Infantile paralysis is a functional disease of the spinal cord characterised by a sudden onset of fever, then paralysis, usually followed by muscular atrophy and imperfect bone development is caused by wrong diet, and by eating too much heat producing food-i.e., cereals, white bread, sugar, and cheap candy. This produces an acid condition of the blood and lessens the resistive power of the system. Then, when atmospheric conditions favour this particular disease, it attacks those in such condition the attack varying in severity according to the amount of impurities in the body, and the consequently lessened power of resistance of the child.

In almost every instance the death of a child is traceable to the ignorance and superstition of the parents. Though many children survive, in spite of drugs, vaccines, and serums, in almost every instance they are handicapped for the remainder of their lives by the loss of vitality expended in excreting these poisons.

Disease is a process of purification of the system, its purpose being to burn up and cast out abnormal quantities of faecal matter and poisons that have their origin in our perverted dietetic and unhygienic habits. Nature does not provide any specific remedy for disease. She inflicts penalties for every transgression of laws. When abnormal conditions arise in one's system the fundamental cause must be found and removed. Primarily, disease is a diminished vital force. Local diseases are always the result of a general disorder in the organism, manifested in the weakest part of an organ. Treatment cannot be confined to the organ or part affected, but the entire body must be treated as a whole, if any real or permanent benefit is to be achieved.

Future and more enlightened generations will look back upon the efforts to stamp out disease by the use of vaccination and serums with contempt!

The serious symptoms and paralysis are largely the result of improper treatment during the first few days of the sickness. Giving drugs and injecting vaccines or serums is an obscure, unnatural and unsafe procedure. Over-feeding is the most frequent mistake in the feeding of infants. Nearly all cases of colic and diarrhoea in babies are due to this cause. A large number of infantile diseases can be overcome by regulating the hours of feeding. A child is not always hungry when it cries, and a few sips of water, especially during the night, will produce sleep and give the stomach a much-needed rest.

Children should not be given sugar or sweets, The extensive use of sweets is responsible for a large number of the diseases of the digestive organs. Not enough can be said to warn people against the prevalent use of sweets and various forms of pastry and confectionery.

Simplicity in diet is the foundation of lasting health.

The first thing to do on treating a case of infantile disease, is to give the child an enema of lukewarm water, or soap and water, suitable to the age of the child. At the same time give repeated doses of hot water internally, to which may be added a few drops of Anti-spasmodic Tincture. These things will do well at the beginning. When fever is high, spread a woolen blanket over the bed, cover this with a flannel or linen sheet, dipped in cold water and wrung dry. Place the child on its back on the wet blanket, and wrap it up in the blanket from under the arms, leaving the arms free. Wrap the wet blanket tightly and smoothly around each leg separately and cover the entire body so that no air can penetrate. Now wrap another blanket tightly over the wet one, so as to cover it completely, but not too tightly over the lungs, lest it should prevent free breathing.

Place a cold compress on the head, covering with a dry one, and change every 15 minutes. Place hot bricks to feet. Give the child fresh fruit juice occasionally, or thin Slippery Elm Food. This will be sufficient until the fever passes off.

The causes of infantile paralysis are exhausted nerves, wrong diet, clogged bowels, checked kidneys, and circulation loaded with morbid matters, causing poisoned nerve tissues.

The disease can be prevented by proper food, fresh air, and cold sponge baths.

In infantile paralysis the child should be handled as little possible. It is best to keep the child lying on the abdomen on a soft pillow. Few cases would develop and few bodies would be permanently crippled if these directions were followed.

I once treated a baby who had been very ill with distended stomach and in much agony for days before I called. I immediately had the child placed on its abdomen, giving it occasional drinks of warm water, and using the enema. In a short time it began to recover after vomiting up masses of undigested curds. The child was called "The Water Baby" afterwards.

## EASY PARTURITION: or CHILDBIRTH

The office of maternity is peculiarly that of a woman, and is also the highest and holiest ambition to which she can aspire and a universal law which should be fulfilled. It should be a natural process from the moment of conception to the time of completed labour. Its attainment requires many sacrifices, which she is ever ready to make during the process of reproduction as she considers herself amply repaid for the pains and perils she undergone when she clasps to her breast her new-born babe, the culmination of her anxiety and affections, and the crowning blessing of her life.

Maternity is a legitimate object of a woman's existence, to be attained only through the exercise of a certain function which, for the welfare of society, is not to be thought of outside the marriage institution.

Good health and freedom from hereditary taint is essential in both parties. The disposition to love and be loved, to forgive and be forgiven, is essential not only to the happiness of both, but for securing the most successful results in childbearing, easy parturition, and healthy, well-balanced offspring. You will notice in a true mother's love the sacrifices she makes to secure her child's happiness, She deprives herself of innumerable pleasures, foregoes the enjoyments of society, assumes the risk of unknown dangers, endures the pains of childbirth many times, suffering from the earliest period of gestation until long after delivery to attain the joys of motherhood. And, let me say here, every mother should be proud of her position; for it is not merely the conceiving and bringing forth, the nursing and fostering her child, but she is the mother of its intellect as well as its body, and has to preside over its development so as to enable it to disclose its potent powers, by means of her own words and deeds. She is likewise the mother of the moral man, and in a very real sense, too, for she has to call forth that moral light~ and to develop those moral sentiments, which, if inculcated and fostered in early life, will never be eradicated.

Blessed is the home where the good mother and wife is to be found, She is the richest jewel ever won by man, Without her the nation would fall and civilization crumble; without her, charity would, lose its sweetness, and mercy its tenderness. With duty well-performed she reflects the wealth, the power and the glory of healthy national life, She, with her little one prattling at her knee, is the culmination of man's highest ideals of peace, Christian love and perfect happiness,

All women are not fitted for the duties of maternity. No one should ever marry when in a delicate state of health, or if suffering from any disease transmittable to the child. They have no moral right to bring children into the world who must perpetuate the parents misery by a life of continual suffering disease or infirmities, which threaten directly the physical or moral life of the individual; I mean those diseases propagated, and known as generative diseases.

Of course different authorities disagree as to the transmission of diseases from parent to child. Uncured syphilis is transmitted through several generations, Scrofula, unless opposed by an excellent vital condition in one parent will be intensified in the children. Improper treatment, conditions and surroundings have a great deal to do with disease and transmission.

Pregnancy calls forth increased vital action, and everything should be provided to maintain healthful conditions. It is of prime importance to consider the influence of the mother's mind over her own physical and mental well-being and the future of child.

During pregnancy the whole nervous system is in a state of exaltation. This is natural on account of the extra amount of work to be performed and the changes that are taking place. This should be remembered and due allowance made for the sensitive nature both with regard to the physical impressions and mental influences of the expectant mother, for all these considerations help in securing an easy delivery.

If we consider how little suffering the lower animals experience in bringing forth their young, we are at once led to enquire why. Is it not because they live in a very simple and natural way; their bodily functions are not abused or disturbed is not necessary that the human female should suffer as she does in childbirth, and why should she have to endure such agony?

It is because she abuses her body dietetically, and does not live in accordance with nature like the lower animals do. Physiologically considered, the healthy performance of any bodily function is unattended with pain; pain is the result of morbid conditions due to obstruction of the blood circulation.

It is conceded that childbearing, being necessary to the perpetuation of our species, is a natural function. Consequently if we accept the doctrines of physiology we can only infer that childbirth should be without peril, and practically without pain surely is not intended by an all wise providence that women should suffer such terrible misery while her male companion, equally interested in its results should wholly escape.

There may be exceptions, working through sympathy, or, I may say, telepathy. I knew of one or two cases in America where the husband took on the same symptoms and conditions as his wife all through maternity until the babe was born. There should be many more of this kind amongst the male sex, and then they might be more careful to observe Nature's law. It is very evident that all women do not experience the same degree of suffering, and we infer there must be some good reason for the difference. Every effect must have a cause and the question arises :-Are we not capable of ascertaining the reason why some suffer less than others, and by bringing about the same conditions to all, ameliorate the suffering of all?

Let us take example from the uncivilized travelling Indians of Western America. Riding along the country roads or by-ways, the squaw realizes that the hour of delivery is at hand. She betakes herself to some stream and sheltered place, gives birth, washes her young "Injun" in cold water, straps it upon her back, and before she has been scarcely missed she mounts her pony and gallops on after the rest, whom she overtakes after a few hours absence. If she experiences any of the annoyances of pregnancy that afflict the daughters of the civilized, or artificial life, she gives so little heed to them as to attract no notice whatever. When ill the Indian mother uses SquawVine Herb, or Wild Raspberry Leaves, gathered on the wayside, which, made into tea, she drinks warm. We to-day should thank our American Indian friends for the knowledge of these valuable herbs passed on to us. These people live on the plainest food and their

methods of living are also of the simplest. In our civilized world to-day this explanation is necessary, and we are bound to believe that difficult, painful, tedious labour is due to some abnormal physical condition. In the United States of America and in Ireland, in the country places, during my own life I have noticed amongst the poorer classes that those who were robust and who had to depend upon their daily toil for the necessities of life, living on the plainest food, and to whom luxury was a stranger, suffered little from painful parturition.

I have known of many such cases where labour was easy and baby born quickly without an attendant. In some cases perhaps the husband, or a little girl, not even a midwife, helped the women to give birth, and in a few hours they resumed their usual duties without any mishap and were strong and healthy and lived to a good old age.

I have in mind a lady who passed through four very painful and tedious labours. Instruments had to be used. This woman was continually in poor health between the birth of each child. She was told by her doctor she could not survive another childbirth. She became pregnant again, and I advised her to drink Wild Raspberry Leaf Tea instead of ordinary tea, for three or four months before the expected time, and during this time she was in good health. When the time came the baby was born before the doctor or midwife arrived. The delivery was normal and she had very little pain. The woman lived to enjoy good health long afterwards. If space would permit I could repeat many more such cases of what are called among Herbal Doctors, Raspberry Leaf Babies.

We do not deny that childbirth is attended by dangers, but those who know and live in accordance with the laws of nature these dangers are very rare.

Natural labour is short and painless, or nearly so and should not be tedious and painful. In a healthy state the organic nerves that supply the uterus, are never sensitive. Irritation, debility, congestion and inflammation cause these nerves to be sensitive and painful. These abnormal conditions are brought about by violating natural laws. Good health must be established for labour not to be difficult.

The causes of pain at childbirth are various and may depend upon the condition of the mother, or of the child. Where the mother indulges in over-eating heavy and rich foods, and an excess of meat, we find the headbones of the child large and not so pliable as in the children of women who live more moderately on meats and more freely on a green vegetable salad and fruit diet. I have found it so in a great many cases and have attended over one thousand confinements without any mishap.

I always put my patients on a more or less vegetable and fruit diet giving Herbal Tea, and using meat very sparingly. In easy childbirth the organs of the mother should be perfect, and the pelvic bones correct in shape. We find, in the uncivilized mother, the abdominal and pelvic muscles well developed by the exercises to which her life is subject; her hips broad and deep to support the burdens she must often carry; her nervous system not rendered acutely sensitive by debility or disease, and she almost entirely escapes the pains and perils of childbirth, to which the Society and fashionable women of to-day fall victims. The artificial modes of life that impair the constitutional vigour of the fashionable woman deform her body, preventing her organs from functioning naturally, rendering her a prey to various forms of disease, and to prolonged painful childbirth. During pregnancy and probably for some weeks after delivery the suffering of these fashionable women is continuous.

On the other hand, the plain-living working woman scarcely notices her condition and pays no attention to it, being only inconvenienced by a few days' absence from work, and the extra tax upon her resources for the maintenance of the child.

Tight lacing, insufficient and improper exercise in the society woman causes her back to bend inward and forward so that the power of the vertebral column to support weight from above downward with ease is diminished on account of the greater angle, giving rise to the sensation of backache. This increased curvature throws the abdomen forward beyond the direct line of the body, and in childbirth much of the abdominal muscular effort, particularly of the diaphragm, is lost because it is expended in the direction of a line with the pubic bones instead of the cavity behind them, the pubic bones opposing a force, that no muscular effort can overcome.

In such cases the labour is protracted on account of the improper direction of the muscular force, which is often feeble.

The woman who in her daily labours is compelled to perform such exercises as develop all her muscles, particularly the erector muscles of the spine which support the heavy weight she is often obliged to carry, thus developing a natural condition, prevents extra curvature the other sustains so that when labour comes on her the abdominal muscles acting in harmony with the efforts of the uterus cause an easy and quick birth, because no force or effort is lost by being directed in a line deviating from the direction which the child must take to make its exit.

Tumours within the pelvis retard and endanger delivery, according to their size, by pressing upon the nerves and cause very great agony. Inflammation of the uterus or womb, is responsible for much suffering, because the womb is abundantly supplied with nerves which are involved in this inflammation, consequently the parts are very sensitive and painful. The use of caustics and incisions in the neck of the womb for the cure of disease or removal of strictures is generally followed by scar or cicatrice which, being inelastic, causes great pain and leaves a worse condition than before. Undue dryness, or any cause that will render any part of the generative organs sore, sensitive or tender, whether it be inflammation, ulceration, swellings, common leucorrhoea, diseases of the bladder, piles, anything that impairs the integrity of any tissues surrounding the uterus, will necessarily increase the suffering at the time of birth. Rigidity of the perineal muscles is very apt to cause pain in the latter stages of labour. Sometimes the rigidity is so great that the perineum will rupture instead of relax. Here non-poisonous herbal relaxants and heat are needed.

The condition of the child is to be considered; especially the size of the head. We all understand that the softer and more spongy cartilaginous the bones are at birth, the more compressed the head will be and more easily will it adapt itself to the passage.

Very nervous women suffer from nervous excitement during gestation and delivery, more so those who lead artificial lives, or those whose constitutions have been shattered by disease.

Every precaution should be taken to prevent ill-health by getting the expectant mother in as healthy a condition as possible, so as to endow her unborn child with a perfect constitution. Avoid every influence that can possibly fret, annoy, distress, *or* in any way injure her. The husband can do a great deal to help by preserving the tranquility of her mind, and removing all sources of anxiety and annoyance. By every possible means he should contribute to her vigour, cheerfulness and happiness, keeping her mind from gloomy foreboding, anxiety or fear and restlessness.

If conception occurs while the woman is nursing another child it should be weaned at once, for her physical forces will rarely, if ever, enable her to maintain both, without impairing their vitality and injuring herself. A gently active life is best. She must not indulge in a life of indolence or in prolonged or violent exercise, or running, dancing, rowing, lifting, carrying heavy weights, or riding in uncomfortable or uneasy carriages over rough roads. These are harmful and liable to bring on a miscarriage. Railway traveling is unwise, tho continuous jar of the carriage being dangerous. The expectant mother must preserve her own health and the health of her unborn child. She would be well advised to sleep alone, as all the rest she can get is needed. She requires as much fresh air as possible, as there is more than the usual amount of blood to be aerated. One pair of lungs must perform the work of two and that under most unusual circumstances. The child is in the womb, where its lungs cannot be inflated, and the mother's lungs are, in the later months, crowded by that same distended womb and always given extra work to do, thus requiring more oxygen to carry on the disturbed circulation. Let the air that is breathed be pure. It is in the lungs that many of the impurities of the blood are discharged and if they are not carried away by contact with pure air they must, in part at least, be taken back into the system.

Bathing is necessary to carry off the impurities and waste, but should be tempered to suit each condition, varying from a cold hand bath to a hot slipper or sitz bath. Nervous women will find that a warm bath, taken just before retiring, will allay irritability and nervousness and induce sleep.

It moderates pain and soothes the entire system, and if not continued too long will not debilitate, but rather invigorate. Bathing should not usually be indulged in while digestion is going on. The sitz bath is beneficial, used from a few minutes to one hour. This bath has the effect of strengthening the nerves, drawing the blood and humours from the head, chest and abdomen, of relieving pain and flatulency, and is of the utmost value to those of sedentary habits. I have many times advised my patients to take this bath two or three times a week, or as need. Sometimes it is advisable to put the feet in warm water at the same time. If there is a headache, or if the head feels hot, apply cold bandage around the forehead and temples. The sitz bath is good for any person, as it relieves giddiness, and headaches or congestion of the blood in the upper part of the body.

It is well to massage the abdominal muscles of the pregnant mother with cocoa-butter night and morning. Dress should be loose and comfortable and so arranged that unequal pressure is avoided. It should be suspended from the shoulders, and the breasts should not be pressed or injured in any way. Woollen underwear is always best, and should be loose fitting. Compression or heavy and tight clothing is sure to cause damage and suffering. The impregnated womb constantly expands and it must have room for expansion. Artificially the walls of the abdomen are so bound in by tight clothing as to render resistance to the development of the womb. The muscular fibres are less yielding and when the time comes for them to alternately relax and contract to aid in the expulsion of the child, they are unable to do so without great difficulty, and this causes prolonged and painful labour, due to the delicate nerves of the womb being pinched and tortured as the dense muscular fibres contract upon them. The venous circulation is always more or less obstructed during pregnancy, thus causing varicose or distended veins, more so in the lower limbs and often around the vulva. All those things that hinder the flow of blood should be avoided. The herbal doctor must always aim to keep the blood pure and its circulation unobstructed.

Rich and highly-seasoned foods should not be used, as they tend to make the blood too rich and sluggish; also excesses of starchy foods and pastry should be avoided. People who exist on a diet of this kind complain of difficult breathing on account of the lungs being unable to aerate and oxygenate the large amount of carbonaceous and proteid material in the blood. On the other hand it is well known to physiologists that if certain nutritive elements are deficient, those structures into the composition of which they enter must necessarily be starved. For example, bones are composed very largely of calcareous or earthy matter, and the process of ossification is not completed in all the bones until the child has reached adult life. In the early stages of foetal life, what afterwards becomes bone is in a state closely resembling gristle, and it is not until several months have elapsed that the deposit of earthy matter takes place in this gristly substance; but so rapidly does it take place that at birth some of the bones have acquired hardness and thus preserve the form and shape of the child. This bony development, therefore, we want to retard in order to render the birth easy; and as the earthy substances that form bone, as well as the materials that compose the other structures of the child must necessarily be derived from the blood of the mother, and her blood in its turn be supplied by her food, the question naturally presents itself, why cannot the food of the mother be selected, so that there shall be a sufficiency of all the nutrient material, except that which causes the hardening of the bones? It is a very great mistake that the mother imagines she must overfeed herself throughout pregnancy in order to support and nourish the unborn under the mistaken idea that she must "eat for two" (we often hear this remark made). On the contrary, instead of eating more than she wants, she should be governed by the dictates of hunger, and never eat an extra mouthful. The amount of nourishment the foetus requires day by day is very trifling. As a result of such a mistaken notion she disorders the stomach, becomes heated and feverish, is troubled with headache and dizziness, makes herself liable to numerous intestinal disorders, and if assimilation is active in proportion to the increased amount eaten she becomes extremely fleshy, flabby, and liable to swelling, cramping, and many other uncomfortable conditions.

By excessive eating she increases the growth of her child, and hardening of its bony structure, especially of the head, thus causing very painful delivery. This has been proven many times in my practice, After difficult parturition I have induced the mother to experiment on a mixed diet such as apples or orange night and morning; good whole meal bread and butter; fruits of all kinds; unpolished rice; a little fowl, lean mutton or fresh white fish; lemon water or raspberry leaf tea; no tea or coffee and no tinned or salted foods. The result has been better health, less stomach trouble, less swellings of the feet and limbs, an easier confinement, and a healthy child. Further, with regard to bone-making material, it will be an easy matter for the mother to partake of more cereal foods, which are the foods containing calcareous materials, such as oatmeal gruel, wheatmeal porridge and bread, when the crisis has passed.

It is important to keep the intestines clean and healthy and thus prevent blood poisoning by absorption of the faeces, When women are troubled with constipation or piles, due to pressure from the womb, give the following mixed with honey, one teaspoonful night and morning, more or less, as the condition requires:

Powdered Black Pepper	1/2 oz.
English Rhubarb Root	1/2 oz.
Liquorice Root	1/2 oz.
Elecampane Root	1/2 oz.
Marshmallow Root	1/2 oz.
Powdered Caraway Seeds	1 oz.

Mix well and keep dry in a tin.

When labour commences, if it should be slow and tedious give a cupful of Raspberry Leaf Tea every twenty minutes, stimulated with a little Composition Powder or Essence. This treatment will surprise the patient, attendant and doctor who have been expecting a long tedious labour, as all former confinements and it is free from the dangers of "Twilight Sleep" (the morphine and scopolamine treatment). Drink Raspberry Leaf Tea every day for three or four months previous to confinement.



Squaw Vine, Blue Cohosh, or Raspberry Leaf babies, with a mixed diet and hygienic conditions, as described in this article, are born normally and according to Nature's method, while "Twilight Sleep" babies may appear normal, but in after life they are liable to have some defect. Opiate poison is more destructive to the nervous system than a bout of drunkenness, and would teetotallers agree to have their wives made dead drunk in order that they may escape the pains of childbirth? Not likely, especially when there is no need for it by following natural herbal treatment, which is not only safe, but in harmony with direct Divine teaching: "And the fruit thereof shall be for meat, and the leaf thereof for medicine" (Ezek xlvi., 12), Why, then, not follow the herbal and hygienic treatment and so allow nature to work in harmony with her own laws, in bringing forth healthy children, who are so much needed to-day for the building up of the national life; beside saving much suffering, and many a doctor's bill?

We can assure our readers that if the directions herein given are faithfully observed, many mothers will rise up and thank God for this bountiful provision, and bless those who have brought this invaluable knowledge to their notice.

But again, let me repeat, this applies to mothers who have been drinking Raspberry Leaf Tea (not less than a pint a day) for three or four months previous to confinement.

### **Recipe for making Raspberry Leaf Tea.**

Make like ordinary tea in the proportion of about 1 1/2 ozs, dry Raspberry Leaves to two pints of boiling water, This should last not more than two days,

The value of Raspberry Leaves is that they are a mild astringent, and cleanse the tissue of any morbid material adhering to them, thus allowing them to relax and contract in a natural manner.

Raspberry Leaf Tea may be sweetened with honey, but not with manufactured sugar, and milk or cream be added when taken as a substitute for tea or coffee.

As a medicine for children, Raspberry Leaf Tea is invaluable. B. V. Scott in his little book, "Voice of Nature," says: "A more valuable medicine cannot be," and that, "for the complaints of infants and childhood it offers one of the most useful and safe remedies."

## **MENOPAUSE**

or

## **The Change of Life in Women.**

### **MENOPAUSE.**

During the climacteric, or the change of life, when the function of reproduction is at an end, physical changes take place as marked as those at puberty, when the function is being established.

At puberty the organs of generation enlarge and the process of ovulation begins. At the Menopause ovulation ceases and the organs diminish. The ovaries become small and shrivelled, resembling a peach stone in shape and appearance; the uterus becomes contracted, the mouth entirely closing after a time, the vagina diminishes in size, as do the breasts. In a healthy state of the body it is just as natural for the menstrual flow to cease as it begins and should be no cause for worry. Any illness or affliction from which a woman may suffer at this time of life, and which the Doctor is unable to cure, will usually be pronounced by him as due to the change of life, and that time alone can bring relief. At this period of life more than at any other time the majority of sufferings and ailments of women can be traced to some ovarian or uterine disease resulting from a congested and irritated state. Uterine inflammation and derangement will also cause many of the distressing ailments of the Menopause.

The menses occur about thirteen times a year for a period averaging thirty-two years, save for the interruption of gestation and sometimes lactation. The time of the cessation of the menses is as varied as the beginning.

It may occur at any period between thirty-five and fifty; but in the majority of cases irregularity or cessation may be looked for between the forty-fourth and fifty-second year. As to the manner in which menstruation ceases, considerable differences are manifested. With some women it stops suddenly without inconvenience, and they get alarmed at this; but if they are in a state of good health and all other functions are normal, their fears are groundless. Should, however, this sudden cessation be attended with debility and symptoms of derangement, treatment is very necessary. In others the cessation is gradual, the monthly flow becoming more scant as each period comes round, while in still other cases several months may elapse without menstruating, followed by a natural flow, or an excessive and prolonged discharge.

The period during which these symptoms occur is extremely variable. It may be only a few months, or it may be several years. In extreme cases the symptoms have continued nearly twenty years. The average period, however, is three years.

These changes are accompanied by various pathological symptoms, Hot flushes with a sense of suffocation often pass over the body. There is a glow of heat (as if one had entered a hot room) which is followed by profuse perspiration, and possibly chill or cold perspiration, lasting from a few seconds to several minutes, occurring at any time during the day and night and varying in frequency. These hot flashes may be looked upon as a favourable symptom, and as a struggle of nature to relieve herself through the skin. Sometimes nausea and vomiting accompany the hot flushing, followed by weakness and exhaustion. Profuse menstruation is often very annoying during the Menopause, and while it often follows the hot flushes it occurs independently of them. At night the sweating is sometimes so great as to saturate the bed-clothing, and is exhausting to the sufferer. These hot

flushes may be followed with cold perspiration and a peculiarly deathly feeling all over the body, returning many times during the night and day. This is most dangerous and must be treated, as it is very lowering to the vitality, causing a state of complete wretchedness and finally collapse and death.

To mitigate these symptoms and assist the processes of nature take one half ounce each of the following Herbs :

Bogbean.

Red Sage.

Tansy.

Pennyroyal.

Stinking Arrach.

Watermint.

Ginger Root (crushed), one ounce.

Mix, put one ounce in a jug and pour one pint of boiling water on the mixture, Cover the jug and keep contents warm for half an hour. Then strain and take one small teacupful four times daily. Keep the bowels regulated with a simple aperient of equal parts of the following :

Powdered Cascara Sagrada.

Powdered Dandelion Root.

Mix well. Dose: One-half teaspoonful in syrup or honey.

A fitful, capricious appetite often exists during the Menopause. This perverted appetite will lead to liver and stomach derangements.

Neuralgia, headache, with heat at the top of the head, or at the base of the brain, dizziness, sore and swollen breasts, difficult breathing, and insomnia may be enumerated among the possible sufferings during this period. A woman's future health depends on the cure bestowed upon her physical and mental well-being at this time. Eruptions on the skin are not infrequent, and, like the perspiration and hot flushes, are Nature's effort to cast out impurities and to establish an equilibrium; but, while the eruptions are not pleasant to hear or see, they should not be dried up. The parts affected may be kept cool and soothed by applications of soda and water, and afterwards dusted with fine Slippery Elm powder. Women who have been accustomed to a hard living, or those who have used themselves to stimulating or highly seasoned foods, as well as those who have suffered much from biliousness and liver affections, are the ones most subject to be attacked with skin disease at the change of life.

If the system becomes morbid, with a tendency to obesity, increased heat of blood, itching of the skin, with a congested state of the stomach, liver, or bowels, we very often find diseases and eczema of the vulva and parts around. There is Climacteric Diabetes that causes a kind of eczema at the Menopause. The labia are swollen and there is a red flaming eczema extending far around the perineum, making life a misery. I find that by treating the kidneys and rendering the urine neutral, relief is obtained. Externally bathe the parts with a solution of Witch Hazel, Myrrh, and Glycerine; dry the parts well, and keep dusted with equal quantities of fine Slippery Elm and Fullers Earth, mixed well. Keep the bowels working regularly. Sponge the body down every morning with tepid or cold water, drying thoroughly with a coarse bath towel in order to create a healthy action of the skin.

Bleeding Piles sometimes afflict women at the change, especially if constipation is present. The constipation must be overcome by proper food and frequent cleansing of the colon. Warm injections made from an infusion of Witch Hazel Leaves or Bur-marigold will both arrest the bleeding and cleanse the rectum.

Uterine Haemorrhage (or excessive bleeding from the womb) is common at this period, and is one of the most serious symptoms, which naturally causes much anxiety. It may occur monthly or at infrequent intervals, or it may be almost constant. Frequently it is due not to the age of the patient, but to some local disorder of the uterus, which may or may not be associated with the climacteric period. If allowed to recur without steps being taken to arrest it, health and life may be endangered. For this condition take the following medicine :

Beth Root Powder	1 oz.
Cranesbill Root Powder	1 oz.
Composition Powder	1 oz.
Bayberry Bark Powder	1 oz.
Cayenne Powder	1/2 dr.

Mix well. Put one teaspoonful of the powder in a large cup of boiling water, adding one teaspoonful of sugar; cover and keep warm whilst infusing. Take of the clear warm liquor one dessertspoonful every half hour, until relieved.

As an injection use :

Cranesbill Herb	1 oz.
Witch-Hazel	1 oz.
Boiling water	2 pints.

Simmer a few minutes, strain and use warm as an injection to the vagina once or twice daily.

Women at this time oft-times and for no apparent reason become semi-invalids, and remain so for years, I have found many such cases in my practice. One patient remained in bed for five years apparently helpless. As years went on she was compelled to help herself and finally recovered.

As the change of puberty comes to both the boy and girl the change of life comes to both mature men and women. As the girl's organism develops the ovum-the active female principle ceases to develop it after the Menopause, so in man's organism the sperm gradually ceases to develop.

Without hygienic precautions, men may suffer from the change as seriously as women. Nervousness, insomnia, pain at base of the brain, tendency to softening of the brain, and insanity are some of the ailments; and according as the sexual vigour has been guarded or not, will be the severity of the change and the extent of the decline thereafter. During the time this change is taking place there should be no sexual intercourse, because congestion and inflammation are thus being invited, causing serious conditions to arise.

Statistics show that a great number of deaths occur in men between the ages of 45 and 62 years through a want of understanding that this is a very distinct and important time of life, and a lack of how to fortify the system for the change in order to pass through it with undiminished health. This mid-life is really a period of re-adjustment-a revolution of things-and visits all in a greater or lesser degree.

The two most common conditions present when the change of life commences are:

1. The body becomes more fleshy.
2. The body becomes feeble and weak, and the nervous system is affected.

The first have their lymphatics dogged by the presence of matters which should have passed off through other channels of the body. When these glands are not allowed the properties in food which thin down their contents they become thicker and sluggish, and do not expel their contents as they should do. They become filled with what is called "Albuminose," a mixture of starch, and a substance like the white of an egg.

The abdomen becomes enlarged, there is palpitation of the heart, and shortness of breath, while the hips and shoulders and under the arms become fleshy.

There is dizziness and headache, a feeling of despondency, and a lazy or tired feeling, with no energy for work. This state can be remedied by the daily bath and diet. Use good wholemeal bread, salad, vegetables, oranges, and grapes, and other seasonable fresh ripe fruit. Drink weak Sage tea and Dandelion coffee instead of ordinary tea and coffee. As a medicine drink Tansy infusion, one ounce to the pint.

The second are the class of people who are thin and nervous, and who suffer more mentally, and are people in whom a condition exists which might be described as a lack of food for the blood corpuscles in the body.

Their corpuscles have been starved of food and oils that would render them free from nervousness. Oil to the blood corpuscles is as necessary as grease to the axle of the carriage. These cases lack pure air, and suitable foods, such as those already mentioned with the addition of lean mutton, fowl, and fish having scales and fins. As the time approaches for the change of life the constitution should be prepared for it. We must keep in mind the four organs Nature has devised for removing impurities from the body and keep these organs free for their proper functioning.

These are the lungs, the skin, the kidneys and the bowels. At every round of the circulation the blood goes to the lungs to be purified. It is said that all the blood in the body passes to the lungs about eighteen times per hour. The deeper the inhalation of breath, the more extensive the purification and vitalization of the blood.

It does not take many minutes to cause death when the supply of air is suddenly cut off altogether. Is it not then clear that the action of the air cells should always be encouraged rather than hindered? Women entering the climacteric period should make a practice to breathe deeply, and see to it that no function of the body is hampered by tight fitting clothing.

The skin does for the blood in the capillaries of the body what the lungs do for the blood in the air cells. It not only rids blood of carbon and supplies it with oxygen, but regulates its density by evaporating the watery constituents. The skin is the great drying, draining, and evaporating apparatus of the body. It combines the functions of the lungs, kidneys, liver, heart and bowels and is the greatest medium of nervous and vascular expansion, and is therefore the seat of thrilling sensibilities and exquisite tactile endowment.

It is necessary at Menopause that activity of the skin be encouraged by daily baths. The full bath is heat where there is tendency to inflammation or haemorrhage. Fleishy women can freely use the hot bath, while thin women should use it not less than twice a week, afterwards rubbing the whole body with Oil and Cream. This encourages and assists nutrition. In attack of haemorrhage the full hot bath will relieve when other means fail. In the circulation of the blood, through the body not only new material is carried to the parts that need it, but the worn out tissue and food excesses are collected and carried to the eliminating organs. All waste fluids that do not escape through the lungs, the skin, or the bowels are taken from the blood by the kidneys. If breathing is imperfect, the skin unwashed, or the bowels constipated, the kidneys are overtaxed. They eliminate all the impurities possible, and by over doing it gradually lose some of their power. Hence the development of kidney disorders, result in worn out matter remaining in the blood and developing vascular impurities, which must encourage disease.

Again, the beginning of puberty shows vast changes in the entire vascular system, and also much change in the whole sympathetic nervous system besides in the field of nutrition.

The most manifest change at puberty is shown by a perturbed nervous system, while the cessation of menstruation means the death of a great nerve function, and the atrophy of a dominating organ that has the greatest nerve supply of all the viscera.

After the cessation of the flow the most prominent symptom is that known as flushes. Over eighty percent of women will experience this peculiar phenomenon at the Menopause. Two distinct propositions will explain this. It results either from a disturbance of the vasomotor centres, or from irritation of the heat centres. The heart and vasomotor centres are unbalanced by irritation at the Menopause. The hot flushes may come on rapidly and irregularly for a short period, and then cease for days. The patient indicates that the disturbances are first manifest near the stomach and then rapidly spread over the head and chest. The blood vessels of the head and neck appear most affected, yet the skin of the whole body shares all the disturbance. The nerve impulse which should be emitted along the hypogastric plexus is abnormally forced over other plexuses and the vasomotor centres become irritated, resulting in dilatation and contraction of the peripheral vessels. All molecular action generates heat, and it may be that much of the heat experienced is due to the rapid dilation of the vast number of vessels and the rapid flow of fresh blood in them. As the cheeks glow and the skin grows red with flushing blood the patient experiences sudden heat. Besides the disturbance of the vasomotor and the heat centres the sweat centre is also irritated, the flushes being followed by various degrees of sweating. This is just as irregular and uncertain. The quantity of perspiration varies from a fine moisture to great drops.

It is apparent that profound disturbances arise at, both puberty and Menopause, and it is not strange that tradition attributes some diseases to the advent of puberty and many grave conditions to the Menopause. Disease at the Menopause must rest on some irritating centre, chiefly the genitals and their nerves. Eighty per cent of such women suffer in general from nervous irritability. Fifty per cent have disturbance in the heat and circulating centres. Fifty per cent suffer deranged sensations, hyperaesthesia and anaesthesia.

Perhaps forty per cent of women at the Menopause suffer from headache, abdominal pain and perspiration, and about twenty per cent. suffer from leucorrhoea, sudden flooding and sweats. This means that all the secretory apparatus of the skin, mucous membrane and centres are deranged.

It is well known that a stormy puberty generally means a stormy Menopause. If a girl begins menstruation with pain and disturbance it generally indicates diseased genitals, oviducts, or uterus, and the sympathetic system will suffer.

A few weeks or months of pelvic irritation gradually produces deranged visceral rhythm and consequent indigestion. The addition of indigestion to a diseased visceral focus puts a double burden on the whole system. The nerves become more irritable. Indigestion persists and soon brings on distinct malnutrition, another burden to the ganglionic system of nerve. All this continues until anaemia arises, the result of waste-laden blood, which affects all the thousands of ganglia and nerve strands in the body, when the patient becomes nervous and irritable. Thus the great assimilating laboratory of life is deranged.

In the Change of life the cerebro-spinal axis is disturbed through the vasomotor nerves and the circulation by some form of reflex neurosis. Hence a woman's mind is often disturbed. She loses her old will power; her memory is impaired; she cannot concentrate for effort. She is liable to do damage from inability to control her own actions.

The law recognizes with leniency any deviation from rectitude during Menopause.

The treatment of women during the Menopause must be local, general and moral. The "cog" in the "wheel" which interferes with the smooth running of the human "machine" must be remedied. General debility and irritability must be allayed by tonics, good nourishment, rest, and freedom from care and worry while the unhinged moral views must be removed by a change of life from the old ruts which caused them.

One fact must not be lost sight of. When pelvic disease has started a train of evils which are continued for years we cannot expect very much from medicinal treatment alone.

Tumours and cancers are of more frequent occurrence during the Menopause than at any other time of life, especially if the cervix, or neck of the womb has at any time been injured by an abortive act, or by cauterization. Also those who have been subject to painful menstruation or dysmenorrhoea in its inflammatory form are subject to malignant disease. The female generative organs are liable to congestion, inflammation, neuralgia, and enlargement.

The breasts are properly to be considered as a part of the reproductive system, and menstrual and uterine diseases are often manifested by diseases of the breast. In fact, uterine disease is, in a large proportion of cases, manifested by wasting of the breasts; hence these organs, so doubly essential to the health, happiness, and usefulness of women, are themselves prone to disease. They may be arrested in their development, or after having been developed they may undergo retrograde metamorphosis and become shrunken, shrivelled and unsightly, or development may proceed to such an extent that they become very large and burdensome-the seat of tumours, cancers, inflammation, and abscesses. Tumour and cancer are most common at the Change, and therefore any swelling in this locality must naturally cause alarm. The diagnosis is not easy except when the disease is well advanced, and physicians often find it difficult to distinguish between benign and malignant tumours. The form of cancer found here is generally very hard, and in common parlance is frequently called Stone Cancer; while in professional language it is named Scirrhus. It is very hard and knotty to the touch, and there is a darting, gnawing, lancinating pain. When well advanced the lump becomes immovable, the surface discoloured, the nipple is drawn backward into a mass, the glands in the armpit are enlarged, and the whole complexion gradually develops that peculiar, waxy sallow hue known as Cancerous Cachexy. On the other hand, benign tumours do not present these characteristics and may become much larger than a real cancer.

*Treatment*-We must consider conditions present: and apply the remedies in accordance with those physiological and therapeutic laws that govern scientific treatment, by treating the blood and ridding the system of all these poisons, with non-poisonous herbal, blood-purifying medicine, diet, and hygienic methods of living. Moderation in all things should be the watchword. Diet is the most important, since the human body is made up of what is received into it in the form of food, and it is evident that the character of a person's food to some extent determines the characteristics of bodily infirmities. The food must be chosen according to the climate and age, temperament, and occupation of the individual. The best diet is that which is best adapted to the individual requirements. The food should always be well ground by the teeth, and moistened by the saliva-not by table beverages which are apt to induce too much eating. The saliva is a secret necessary to perfect digestion, hence the necessity of eating slowly,

An excess of food causes disorders of the system as serious as a deficiency. It is said that more people die from over eating than from starvation. The diet in disease must be regulated by the nature of the ailment. Food otherwise wholesome, may under certain conditions, increase disease. What is necessary in disease is to avoid such food and yet maintain the functions that are normal. When the system is reduced by disease, the digestion loses its normal activity through the sympathetic nervous system being deranged, and needed nourishment must be supplied by foods that are easily assimilated. Fresh fruits and salads are beneficial to the system for their vegetable acids and salts. Unripe fruit must not be eaten on account of the quantity of starch that has not been converted into sugar, and which would cause deranged digestion. Salads made in different ways to suit each individual and bread made from wheaten meals are ideal foods. Avoid starchy foods-especially potatoes and pastry; also pork, coffee and tea. Instead, drink tea made from Pansy or Sage, herbs that are cleansing to the bowels, and that relieve the lymphatic system. Drink soft water, preferably filtered rain water.

A cold sponge down with, the wet hand or towel, taken quickly, followed by brisk rubbing with a coarse towel, and deep breathing, are very essential to keep up the circulation and remove sluggish conditions. Warm comfortable clothing is next in importance.

### **Summary, of Menopause:-**

The average Menopause lasts about two and a half to three years. It comes on slowly as does puberty. A stormy puberty means a stormy Menopause generally.

The disturbance at the beginning of puberty is profound; it is an active physiologic process, but quickly fits the growing and adaptive nervous system. The Menopause is a destructive process. It breaks up the harmony of the previous processes and unbalances the even distribution of nervous energy and circulation.

It is well known that every organ receives an equal or greater shock at Menopause than at puberty,

The Changes at Menopause consist in: menstrual cessation, atrophy of the genitals and the hypogastric plexus and pelvic brain in both sexes.

Chief among the actual diseases in the Menopause is endometritis. This is due to the infection from desquamation of epithelia. Attacks of flooding depend on this inflammation. The Menopause is characterised by various discharge, leucorrhoea, bronchitis, haemorrhages from the bowels., etc., and perspiration.

A characteristic phenomenon of the Menopause is an unbalanced, unstable nervous system-cerebrospinal (irritation), or sympathetic (debility). Excessive sexual desire at the Menopause is indicative of disease.

In the Menopause the nutrition is impaired, as is shown by the occurrence of malignant disease in the sexual organs, which are in a state of retrogression.

### **WOMANHOOD.**

This is a study of endless, interest. and profit. The more we study the more we marvel that so little regard is paid to the duty of guarding health and strength and to the laws that govern our being.

It is a fact well established that both the physical and mental strength of the human race depends very largely upon women, mother is strong and healthy, her children will probably be more robust and vigorous than the children of a delicate and sickly mother. If a mother has in her constitution the seeds of any serious malady, her off-spring will be liable to develop that malady in its graver forms, even though she herself may escape its full consequences. Of course, the constitutional weakness or vigour of the father will make its impression, more or less decidedly, upon the children. The strength and prowess of a nation depend chiefly upon the health and vigour of its mother

When we speak of woman's proud position in the world, it is not comprised in the mere fact of conceiving, bringing forth, nursing and fostering the child. She is the mother of his intellect as well as of his body, and she presides over its dawn, so as to enable it, to disclose its latent powers by means of words and deeds. She is, likewise, the mother of the moral man, and has to call forth that moral light and to develop those moral sentiments which, if inculcated and fostered in early life, will never be eradicated.

Blessed is the home where the good mother and wife is found. She is the richest jewel ever won by man. Without her, nations would fall and civilisation crumble; without her, charity would lose its sweetness, mercy its tenderness, and the Christian religion itself would perish.

With duty well performed, she reflects the wealth, the power and the glory of the nation. She, with her little ones prattling at her knees, is the culmination of man's highest ideals of peace, love and perfect happiness.

But all women are not destined to be mothers. Up to about 14 years of age the girl is comparatively a child, with more sensitiveness and less robustness than a boy, yet with very little else to distinguish her from the opposite sex. About her fourteenth year she commences that development of her reproductive system which is to prepare her for the duties of her sex, which is accompanied by a rapid transition from girlhood with its simplicity to womanhood, with its maturity. From infancy up to this period the sexual organs remain so dormant as scarcely to increase in size; and they perform no function and exert no influence upon either the body or the mind. But now their growth is rapid, the entire system entering into sympathy with them; the intellectual, domestic and moral faculties undergo great changes with the sexual development, and the entire future of the budding woman, as affects both her constitution and her mental peculiarities, depend very largely upon the influences which impress themselves upon her at this time. From four to six years may be occupied in completing this new development of organs and functions, which embraces—first, the establishment of menstrual functions; second, that ripening of both mind and body which is necessary to qualify her future. This period is called puberty. The blood supply of the generative organs is stimulated and increased; the excitement and vascularity presently lead to a discharge from the uterus of a fluid resembling blood in all respects except that it will not coagulate. This discharge is called the menstrual flow.

The age of development of puberty varies according to the temperament, race, climate, or condition of life. Brunettes menstruate earlier than blondes; and, as a rule, in warm climates puberty is reached earlier than in cold. Hindoo children are often married and bear offspring before English girls reach puberty, whilst in Russia menstruation is often delayed as late as twenty years of age.

Racial characteristics exert a modifying influence on the age at which puberty arrives. Habits of life influence the change, a regular healthful mode of living enabling girls to reach the period at a natural time, with no danger or inconvenience to life and health.

Insufficient food and overwork deprive the system of vital and the menses come with ill-health and suffering; while high living, which can be hardly be equalized by any amount of exercise, tends to prematurity and the liability to secret bad hal

Simple, nourishing food is always best at this period, as a any other critical time. All dwarfing influences should be discovered and corrected, that the blossoming of the daughter shall not be slighted.

When the menses are regularly established they recur once every 28 days, or each lunar month, and continue from two to days. The discharge at this time is from four to six ounces, but women differ in this respect and are yet in perfect health. The recurrence of the menstrual flow does not cease, except from disease or pregnancy till the close of the natural period of this condition of life which continues about 32 years.

As puberty develops the lips become redder and fuller, the bust enlarges and becomes firmer; the hips become broadened and the thighs become larger; the brain centres have developed the organs of generation have asserted their presence and purpose. It is at this time that a girl needs all the affection and care that a mother can bestow, as the period of menstruation is most important of a woman's life. Whatever causes an unnatural cessation or interruption of this function interferes with the central purpose of the female constitution, and the result of such an interference, if it is not soon overcome, cannot be otherwise than disastrous. A young girl approaching her first menstrual period may evince some marked peculiarities, which should be recognized and dealt with properly. For a time she may be mentally unaccountable for her words and actions, She is apt to exceedingly irritable and peevish, of hasty temper and most excitable. She may appear cruelly unkind or perverse, and again she may be very affectionate and sensitive to impressions. No dependence can be placed upon the state of her mind. Headache is most usual, and with it comes drowsiness and perhaps dizziness and confused feelings, with absent-mindedness, or loss of memory.



Many girls become most stupid and awkward in manner, and commit all sorts of blunders for which parents, ignorant of the facts, will hastily condemn them. Falling to sleep over work or in conversation; dropping dishes or other articles may be committed without intention. The appetite at such a time is apt to be peculiar and unaccountable.

Menopause, or change of life, is a physical manifestation, and has to do with both sexes of humanity. When the function of reproduction is at an end, physical changes take place as marked as those at puberty, when the power is establishing.

We find there are no two people alike. We must consider each individual's temperament, environment, mode of living, and habits. In women who have been very temperate in their habits, and moderate in their feelings, the discharge may gradually diminish, and disappear without causing any disturbance of the system. More commonly irregularities in the flow are suffered; the whole body undergoing various changes. As the period of change approaches, the menses may return a little too early each month, or they may be delayed a week or more beyond the proper time. The quantity may also be increased at some times and diminished at others, and the women usually looks pale and becomes a little feeble and nervous. Later the flow may return every two weeks or ten days for a few times, and then suddenly cease altogether for a few months, and after that return for a season with unwanted profuseness. These variations may be repeated during a year or more, till finally the discharge becomes pale, then white and stops and then ceases entirely.

While these changes are going on some females have enlarging of the breasts and abdomen, with a capricious appetite, and may imagine themselves to be pregnant. Strong and plethoric women are very liable to dizziness, flashes of sharp heat about the head and face, headache, and perhaps bleeding at the nose. These symptoms are due to a rushing towards the head of that surplus blood, which formerly escaped by the uterus, and such persons usually look purplish-red in the face, and their eyes look reddish. There is more or less distress about the heart, and difficulty of breathing, and the sleep is much disturbed by bad dreams and sudden wakings.

These latter feelings are due to a pressure of blood towards the heart and larger blood-vessels. On the other hand, slender and sickly women may suffer extreme irritability and a sense of prostration, become emaciated, pale, wan, and half-chlorotic, with occasional flushes; or the abdomen may shrink and the breasts wither away. Some become depressed, melancholy, hysterical, with peculiar irritability of temper. As I mentioned before, all classes are liable to pains in the back, pelvis, and loins, or itching of the vulva.

The kidneys play a most important part. If all the waste fluids do not escape through the lungs, the skin, or the bowels, that is to say if the breathing is imperfect, the skin unwashed, or the bowels constipated, then these organs are overtaxed, and disorders develop. With daily bathing and deep breathing, drinking at least three pints of pure water between meals in 24 hours, also keeping the bowels regulated with Sarsaparilla Her and observing the rules of right living, there is no need to fear disease or trouble during the Menopause.

In some instances the first change of life may be manifest in a regular manner and still the menses do not appear, and unpleasant symptoms are soon noticed, such as paleness, weakness, severe headache, poor appetite, palpitation, hot flushes, nervousness, dark circles under the eyes, breasts swollen and painful.

Sometimes a discharge of mucus takes place and proves exhausting, or other conditions may follow,

These conditions may be caused by great grief or disappointment, improper living and food, overwork or study, or too much indoor life. The consequences are serious unless overcorrected early. Great care should be used to guard against any influence that may tend to derange the menses. Sudden suppression is always dangerous. Cold baths, foot baths, wet feet, wet clothing and getting colds are very injurious, and may lay the foundation for future invalidism.

The system at this time has a natural strain put upon it, and cannot endure indiscretions. It frequently happens that after the first appearance the menses may not return for a few months, Nothing wrong will happen, Keep the girl healthy, ensure a plentiful supply of fresh air, and good nourishing food. It sometimes happens that uninformed girls are frightened at the first appearance, and try to check the flow by washing in cold water. This is sure to end seriously.

There are a number of derangements which may occur during menstruation.

1st. TARDY MENSTRUATION,-For this there are four different causes, viz., imperfect development, feeble development, excessive development, or malformations. Each one of these must be treated according to the conditions.

2nd. DYSMENORRHOEA (i.e., painful menstruation).-This is the most common, Some suffer from puberty to menopause, due either to exposure, overexertion, obstinate constipation, or improper dressing. Hot baths and hot drinks are usually helpful in this condition.

3rd. OBSTRUCTIVE MENSTRUATION. This is due to growths, stenosis, or atrosia (a growing together of the parts).

4th. MENORRHAGIA (i.e., excessive menstruation).-The normal quantity varies in amount in different women. One may be said to discharge more than is customary, or that the flow is beyond the usual number of days, or recurs oftener than once a month. This is usually due to constitutional causes, which should be removed.

5th AMENORRHEA (i.e., suppressed).-The disappearance of the menses after they become established.-This may be due to pregnancy, or may be due to sudden exposure to cold, wet feet, sitting on damp ground, drinking excessively of cold fluids, or improper clothing.

6th. LEUCORRHOEA, or WHITES (i.e., a non-sanguinous discharge.)-This is a very common disorder, and no age is exempt from it.

Very young infants sometimes suffer as they would from a cold in the head. This can hardly be termed a symptom of any disease although it is present during the course of many maladies. It should be arrested by cleanliness and general hygienic measures, fresh air and drinking White Clover tea during the day.

Too much cannot be said of the benefits derived from exercise in the open air, and deep breathing. As a tonic, they are better than medicine, giving tone to the appetite, aiding digestion, and lending vigour to both mind and body. Invalids who suffer from nervous prostration, or from uterine diseases, should live much in the open sunshine. Other exercises reinforce the strength, increase the appetite, repair the blood, quiet the nerves, and give new life and health to the body. The greatest physicians are good water drinkers, and love sunlight, deep breathing, and exercise in pure air, combined with plain, wholesome food, well-ventilated bedrooms, good company, and pleasant surroundings. Clothing should be regulated to the season, always keeping the body and feet warm and dry. Dress should be no hindrance to anything they wish to do and should always give freedom of body, and should be constructed to relieve the waistline of all weight and pressure, and any article that cramps or hinders free action should be discarded, The weight of the clothing should be borne by the shoulders. No pressure or weight should be allowed to rest upon the hips and bowels, High-heeled shoes should be avoided by the young, whose bones and articulations are soft and pliable. They not only distort the foot, but often engender other troubles, such as neuralgia, pains in the legs, alteration in shape of the pelvic and abdominal muscles, which are kept upon a tension which will in time produce serious inflammation of the pelvic organs, as well as curvature of the spine.

Bicycle riding and incorrect corsets have a most baneful effect on the female organism, The old fashioned garments, even when worn loose, exert a pressure of thirty pounds. The abdomen suffers from this more than the thorax, There is a thinning and weakening of the abdominal walls, which become relaxed and pushed forward when in the upright position by the liver and intestines.

In the sitting posture the pressure exerted by the abdominal wall, which should be backward against the spine, is exerted downwards towards the pelvis, and causes bulging of the vulva in some cases to the extent of half an inch. The amount and kind of food, exercise an important influence on the young girl's health. A hurried and half-eaten meal, long fasts, indigestible and non nutritious foods, should be avoided. All these things tend to produce anaemia and general ill-health. Neglect of the excretions is a very common fault in young girls, as well as women, and especially those with female troubles. The bowels, instead of moving once or twice a day, as they should normally, are evacuated perhaps once or twice a week. The poisons of the waste matter are absorbed and sapremia results. The circulating impurities show themselves in an anaemic appearance, lack of energy, headache, and neuralgic pains. Then again, the bladder is often not emptied when it, should be, and consequently a distention and displacement of the uterus by the enlarged bladder, or paralysis of that organ, or cystitis, may result.

### **MOTHERHOOD.**

Love and kindness is the chief glory of woman. It is indeed her true prerogative; her sceptre and her crown. It is the sword with which she conquers, and the charm with which she captures. Wherever a woman is, there should be a sweet, subduing, and harmonizing influence of purity, truth, and love, pervading and hallowing her circle of influence. Now, the habits of society are such as to stimulate the young woman during puberty, so that she is planning for marriage companionship before her frame is at all ripened to bear the marriage duties. There are many physical evils resulting from early marriage which, generally make the subsequent life a ceaseless round of suffering. A girl may be capable of maternity at 15 years, but she is not fitted to be a true mother until 21 years of age, or even later. There are many conditions under which marriage should not be contracted; for instance, two people similar in power and temperament cannot hope to have healthy or long lived children; or again, two wealthy persons should not get married.

There should not be marriage between cousins. Marriage should not be contracted where there are any pelvic deformities, an absence of menstrual flow, insanity, spinal deformity, consumption, or epilepsy. Such imperfections and maladies will tend to destroy all prospects of domestic happiness. Every married girl may expect to find herself in the position of a prospective mother soon after marriage, but some may not become pregnant for months or years. It will be a great advantage to every woman's mind throughout the term of gestation to know that the duties she is discharging are such as are fully provided for in the organisation of her system. Nature has been moulding her from the day of her own foetal life for the office that she is now to perform, and has been developing her organs and making every provision of vital tenacity, nervous force, muscular contractility and nutritive capacity for the fulfilment of her maternal duties in the most harmonious and successful manner. The periods and duties of pregnancy are divided into three general parts: Conception, gestation, and labour. The entire period of pregnancy from conception to the day the child is born usually covers 280 days, equal to 40 weeks, or 9 calendar months. The period may be somewhat less, or it may be longer. To calculate the date when confinement will take place, count back three months from the date of the close of the last menstruation and add to this seven days. For example, the date of the last menstruation was January 1st. Count back three months, October 1st, add seven days, and this will give October 8<sup>th</sup> following as the date of delivery.

Conception, or impregnation, is the union of the male sperm with the female ovum, by which the latter becomes endowed with vitality that transforms it from a simple egg to the rudiment or embryo of a new being. A girl is capable of conception as soon as the menstrual flow appears. The most likely times for conception are immediately before menstruation, just after menstruation (an inadvisable period, however, according to the Bible, which teaches that there should be absolute rest during the flow and seven days after it ceases); also from 14 to 17 days after menstruation. The spermatozoa of the male may retain their vitality in the vagina for at least 17 days, even including a menstrual period.

Instances are known in which conception occurred just before a menstrual period and was followed by pregnancy. The downward current of blood does not interfere with the upward passage of the spermatozoa. The uterus is the matrix for the development of the new being, the embryo or foetus, and only in rare cases does it occur elsewhere. The life of the foetus commences at the very moment of conception. It is from that minute a living human being, and its rudimentary state no more deprives it of the right of being protected as such, than the rudimentary state of the infant as compared to the full-grown adult, would deprive it of the right of protection or make its destruction a matter not criminal.

Conception takes place soon after the ovum leaves the ovary. Impregnation usually takes place in the uterus. A membrane forms around the ovum, called chorion, and this serves to anchor the ovum to the walls of the uterus. After this the uterus undergoes changes for the evolution of the embryo. The growth of the embryo is very rapid. For nine months the foetus neither eats nor breathes while in the uterus. The system of the mother has to perform the very important functions of preparing its nourishment and purifying its blood. This is done through the medium of her lungs, which become both lungs and stomach to the foetus. The blood goes from the arteries of the mother to that portion of the placenta which is next to the uterus, and then flows back into the general venous blood; or, rather, the mother's arterial blood imparts its burden of nutriment to the child, and the child's venous blood yields up its load of impurities to the circulation of the mother. During this time it is very essential that the mother should keep herself healthy and free from disease.

The growth of the embryo is very rapid. On the 10th day it has the appearance of a semi-transparent grayish flake; on the 12th day it consists of a cell as large as a pea, filled with a turbid fluid, in the middle of which is an opaque spot presenting the first appearance of an embryo, which may be clearly seen as a curved body, and is plainly visible on the 14th day. About the 21st day the embryo resembles an ant, or a lettuce seed, four or five lines long, and weighs 3 or 4 grammes.

At the fourth week the limbs begin to project and the foetus is found to have a minute thread connecting it to a fixed spot against the uterus. This thread gradually develops to a cord as large as one's forefinger, and varies in length from 18 to 20 inches. It is made up of two arteries and one vein, and covered with a tough membrane enclosing a gelatinous mass called Whorton's Jelly. Through this agency the foetus is nourished by the pure blood conveyed to the child from the mother, and the impure blood is taken back to the mother, the cord is called the umbilical cord, and is attached to the child at the naval. The spot at which it reaches the mother gradually enlarges to a disc about six, or seven inches in diameter, and about one inch thick; is so pliable and spongy; is made up chiefly of blood-vessels, and is called the placenta or after-birth.

The thin membrane covering the cell at conception enlarges steadily with the growth of the foetus, and completely occupies the cavity of the enlarging uterus. It consists of a sac made up of two membranes containing the foetus floating in a moderately clear fluid, which serves as a protection against shocks and sudden uterine contractions. At full term it varies in amount from two to five quarts. The two membranes of this sac are called the chorion and the amnion, and the liquid or water is called the amniotic fluid. The foetus observes a very rapid grade of development, and about the 30th day the embryo is as large as a horse fly, and resembles a worm bent together. In the seventh week bone begins to form in the lower jaw and clavicle, and narrow streaks on each side of the vertebral column show the beginning of the ribs. The heart is perfecting its form, the brain enlarging and the eyes and ears growing more perfect. The lungs are mere sacs about one line in length, and the trachea is a delicate thread, but the liver is very large. In the seventh week formed the renal capsule and kidneys.

At two months the forearms and hand can be distinguished. The distinction of sex is yet difficult, The eyes are prominent, the lids do not cover the eyeballs. The embryo is from one and half to two inches long, and weighs from three to five drams.

At the end of three months the eyelids are distinct but shut, the lips drawn together, the forehead and nose clearly traceable, and the organs of generation prominent. The heart beats with force, and the large vessels carry red blood. The fingers and toes are well defined, and muscles begin to be developed.

At the fourth month the embryo takes the name of "foetus." The body is five to eight inches long, weighs from seven to eight ounces, and now produces a sensible motion. A foetus born at this time may live several hours. At five months, the length of the body is from seven to ten inches, and its weight is from eight to eleven ounces. Between the fourth and fifth months, or later in women with thick abdominal walls, the beating of the foetal heart can generally be heard by the ear placed upon the abdomen over the womb. These heart-beats are quite feeble at first, but grow steadily in strength. When first heard they may range from 145 to 160 per minute.

At six months the length of the foetus is from eight to twelve inches, weight 1-lb. and hair appears upon the head.

At seven months every part has increased in volume and perfection; the bony system is nearly complete, the length is 12 to 14 inches, and weight from two to three pounds. If born at this period the foetus is able to breathe, cry, and nurse, and may live if properly cared for.

At eight months, the foetus seems to grow in thickness more than in length, the skin is very red and covered with down and a considerable quantity of sebaceous matter.

At nine months it is from 19 to 23 inches long, and weighs from six to nine pounds, the red blood circulates in the capillaries, and the skin performs the function of perspiration. The nails are fully developed.

The head of the foetus remains very large throughout gestation, and at birth is proportionately greater than any other part of the body, the bones of the skull are not completely dosed till some time after the child is born, but leave an opening of considerable size on the top of the head, and a similar one at the crown.

Nature's ways of providing for self-delivery are here so as these openings allow the bones to so bend, and slip over one another, as to accommodate themselves to the shape of the pelvic passage.

Signs of Pregnancy.-One of the most constant signs of pregnancy is the cessation of menstruation, Where it has been regularly performed and suddenly ceases, and is absent at the time of expected recurrence without any other assignable cause, it may be strongly suspected in married women and in others about whose chastity we may entertain doubts, that conception has taken place, Generally the menses fail to appear at the period after a fruitful copulation, but this is not always the case, as sometimes the menses will recur scarcely modified for one or two periods after the beginning of pregnancy. In some cases it has been performed throughout the entire gestation. This is, however, rare. There are certain cases in which we cannot avail ourselves of this sign of pregnancy. For instance, it sometimes happens that women who have already borne children, again become pregnant before the re-appearance of menstruation. Others conceive, it is said, who have never menstruated at all. Such cases are rare.

Morning sickness often occurs at an early stage of pregnancy but some patients escape it. It is variable in its length, paroxysmal and in its persistence in the course of gestation. In some cases it lasts but a few minutes after onset in others it continues through the most part or the whole of the day.

Again, morning sickness may be aggravated by derangement of the stomach and liver. In gastric disturbance there is usually increased secretion from the salivary glands, morbid longings for food or drink, generally those of a sour nature. Indigestion, intestinal flatulency, and eructation of gas are frequently present.

The appetite is often capacious, or may be entirely lost. Towards the close of the second month, sometimes, certain sensations are experienced in the mammary glands and nipples

There is a feeling of fullness and throbbing, the breasts increase in size and have a peculiar knotty glandular feel, the tissues around the nipple enlarge and are soft and puffy, and assume a darker hue and become sensitive to pressure from the clothing. A dark brown areola or disc may be noticed around the nipple, changing in colour, first to light brown which gradually deepens in intensity until towards the end of pregnancy the colour may be very dark,

The nervous system is hyperaesthetic, and the disposition of the woman may undergo marked changes. Often mental exaltation and depression are exhibited, irritability of the brain is a frequent occurrence, Constipation may be present, also neuralgia may occur in different parts of the body, especially the face. Cardiac palpitation and difficult breathing may be experienced. Often a leucorrhoeal discharge is present, due to an increased circulation in the cervix and vagina and as pregnancy advances, other signs manifest themselves in the uterus.

At the second month there may be a slight flattening of the hypogastrium due to sinking of the uterus and an increased retraction of the umbilicus. After the third month the uterus begins to ascend out of the pelvis; about the 4 and a half month-sometimes later, and sometimes earlier-quickening is felt, and this is one of the most important signs of pregnancy, and one of the most valuable.

Quickening arises from the ascent of the womb into the abdomen. Owing to the increased size there is not room for it below. The child has reached a further stage of development, and has become stronger in muscular and nervous structure, and has strength and motion of limbs powerful enough to kick and plunge about in the womb and thus causes the sensation of quickening.

A woman at this time sometimes feels faint. Quickening is said to resemble the fluttering of a bird; by some it is said to be like a heaving, beating, or leaping sensation, accompanied sometimes with a frightened feeling. After this symptom the abdomen over the region of the uterus is hard and resisting. About the sixth month the umbilicus protrudes-maybe sooner, or it may be later.

The face of the woman is emaciated, the nose especially being pinched and pointed. The features are not altered. As pregnancy advances the face generally resumes its natural comeliness.

Irritability of the bladder is sometimes one of the early symptoms of pregnancy, due to the sinking of the uterus against the bladder in the pelvis. This is usually relieved after the quickening, but usually returns again before the commencement of labour. The weight of the uterus against the bladder induces frequent urination, pains and crampings through the womb and smaller bowels. Nature is preparing her forces for the duties of labour.

General Health of the Mother.-The health of the mother cannot be too highly appreciated or too carefully guarded. The better a woman's health and strength during her pregnancy, the better she will be able to pass through the ordeal of labour and perform the duties of motherhood. A woman during this period often inclined to be irritable and despondent. For the sake of both her child and herself she must try to overcome this tendency. Her husband and friends should try to make her home life calm and happy, and should shield her as far as possible from all disturbing influences. Thousands of children are, by disturbing influences on the mother's mind, in danger of being born the victims of untruthfulness, disobedience, together with malicious threatenings and even murderous tendency. A child is most liable to be affected physically during the earlier months, mentally during latter months of pregnancy. At any time, unpleasant mental impressions may lead to birthmarks.

A mother should not read books that will tend to morbid thoughts, nor keep late hours, nor have any excitement. Deviation from good health should be reported to the physician in charge especially excessive vomiting, loss of appetite, haemorrhage, varicose veins, diarrhoea, constipation, sleeplessness, severe headache, disturbance of sight, such as dimness of vision or spots floating before the eyes; fainting, swelling of the face, hands or feet, or diminution of the amount of urine passed.

A tea made from Raspberry leaves, instead of ordinary tea, should be drunk during the child-bearing period, and freely towards the end. This will tend to render labour normal and easier by giving tone to the parts and aiding the general health of the mother.

To regulate the bowels and prevent and cure piles take the following :

Powd. Black Pepper	1/2 oz.
" Elecampane Root	1/2 oz.
" Rhubarb Root (Eng.)	1/2 oz.
" Marshmallow Root	1/2 oz.
" Liquorice Root	1/2 oz.
" Caraway Seed	1 oz.

Mix all together, and keep in a tin.

Dose: Half a teaspoonful mixed with honey, at bedtime, or oftener as required.

#### LIVER TONIC AND APERIENT.

Take equal quantities of Cascara Sagrada Bark and Dandelion Root, both in fine powder. Mix well, and keep in tin box. Take from a quarter to half a teaspoonful, mixed with syrup, jam, or cold water, before or after meals, or at bedtime as often as required, in liver and digestive troubles.

**EXERCISE AND BATHING**-A healthy pregnant woman will be benefited by daily exercise up to the lying-in period, and should live half her time in the open-air. Fresh air and exercise prevent many of the unpleasant symptoms attendant on that state, as they tend to open the bowels and relieve that sensation of faintness and depression so common in early pregnancy. Although long walks are injurious, one ought not to run into the extreme. Of course, there are exceptions. A young patient of mine, wishing to have a healthy and a perfect child, walked five miles and more daily. Her baby was healthy, strong and vigorous and her labour was normal. Yet another woman could not walk so far without injury to herself. Another patient lay in bed most of the time during her pregnancy, and would not go out-doors much.

The result was a very difficult labour. Short, gentle, and frequent walks during the whole of pregnancy cannot be too strongly recommended. Avoid heavy lifting and all violent muscular strain; also avoid cold and dampness, and keep the feet warm and dry. The function of the skin should be kept active, especially towards the close of pregnancy, to relieve the kidneys as much as possible. A daily sponge bath is beneficial, with either cold or tepid water. A sitz-bath every day is especially good. The water should well cover the hips and pelvis, and may be taken before retiring at night or before mid-day, followed by an hour's rest. Vaginal douches should not be used, except a very low vaginal douche for cleanliness. An abundance of sleep is necessary. From eight to ten hours should be taken, and a nap may be added during the day.

Exercise, fresh air, and occupation are essentially necessary during pregnancy. If they are neglected, hard and tedious labours are likely to ensue. The easy and quick labours and rapid recoveries of poor women are greatly due to the abundance of exercise which they are both daily and hourly obliged to get through. Let the rich woman adopt the poor woman's industrious and abstemious habits, and labour need not then be looked forward to, as it frequently is now, either with dread or apprehension. The lively, active woman has an easier and quicker confinement and a finer race of children than one who is lethargic and indolent. Idleness brings misery, anguish, and suffering in train to pregnant women.

Dress should be worn very loose; no bands about the hips. The under-garments should be continuous from the shoulders, loose to fall over the hips. The hygienic waist and skirt support will keep the skirts in position, and will answer the purpose of corset, giving a neat appearance to the figure, allowing full freedom to the waist and the increasing abdomen. Exercise in deep breathing should be taken daily, full breathing necessary to thoroughly oxygenise the blood. Close the mouth and inhale the air through the nose, filling the lungs. Then open the mouth and exhale, repeating this four or five times for one exercise.

The extra air breathed will form a substitute for a portion of solid food otherwise craved. The air we breathe is as necessary to the building of tissue and muscle as solid food.

**DIET,-**The diet of the mother while carrying a child should be wisely considered. It is a mistake to think a woman requires more than her usual quantity of food, and it often leads to much suffering. A healthy woman will not require more than the usual amount of food. Some women when pregnant have excessive appetites, eating as much at one meal as formerly sufficed for two meals. Such women have large children, often weighing from 10-lbs. to 14-lbs. at birth. These excessive appetites should be controlled. Leave the table while feeling a little hungry, and the craving will cease, the general feeling will improve, and the result will be that the child will not be so large. Cravings for surfeiting with unusual articles of food or partaking of indigestible food often lead to dyspepsia and stomach troubles, which are often transmitted from parent to child. No absolute rule can be laid down, as the same foods do not agree with all patients. Foods should be plain and nutritious. A mixed diet of cereals, vegetables, and plenty of fruits is best. Eat meat sparingly. There will be greater ability for mental and physical endurance and greater fortitude, without meat. Women in the European countries eat very little meat, the poorer classes living on potatoes, cabbage, and cereals. Their confinements are very short in duration, and are attended with very little pain.

A little food well digested is better than a great deal not digested. Meals should be taken at regular intervals, and no alcoholic drinks allowed. The most important drink is pure water. A pregnant woman cannot drink too much water, since so much extra fluid is demanded by the system. Take cereals, fruits, apples, oranges, and grapes for breakfast to keep the bowels regular. If a person is very fleshy and warm-blooded, lemonade and juice of berries and fruits are good. A very thin person should eat farinaceous food, cream, vegetables, fruits, and nuts; avoiding all sweets. The sweets cause acidity of the stomach and thus produce an acid state of the blood, which prevents the increase of fat and muscle.

Soups are very good, and should be eaten at the beginning of the meal. Also whole wheat bread and biscuits, rice, macaroni, milk, cocoa, chocolate, and herb tea or dandelion coffee once or twice daily.

**BREASTS AND NIPPLES,-**During the last months the breasts should be massaged freely, and the nipples washed with bland soap. Dry well, and anoint with cocoa butter. This will prevent sore or cracked nipples during nursing. Also harden them with alcohol or some astringent.

**FLAT OR INVENTED NIPPLES** may be congenital or acquired, and should be recognised at the time of pregnancy. Treatment is to draw the nipple with a bottle or breast pump during the latter part of gestation. Another method is to hold the bowl of a new clay pipe over the nipple, and have another person draw up the stem. You can, by repeating this process a few times permanently develop the nipple. The baby should nurse by means of a glass nipple shield placed over the nipple. After continued use, the nipple will be so improved that it will not be necessary for its continuance, and the shield should be dispensed with.

**FISSURED NIPPLES** are often due to continued change between moisture and dryness, to which they are subject, and are very troublesome and annoying. When the baby is not at the breast, a metallic shield should be worn. These shields are very cooling and healing, and serve to keep off all pressure from the clothing. Some healing antiseptic ointment or wash will obviate the trouble. The nipples should be wiped before and after using with a solution of boric acid. Swollen and painful breasts should be given gentle massage with Chickweed Ointment, and should then be covered with hot moist applications. The same treatment if the breasts become tender.

**MISCARRIAGE OR ABORTION.-**In the term abortion will include those cases wherein the contents of the gravid uterus are expelled before the viability of the foetus. The foetus is usually incapable of maintaining an independent existence before the end of the sixth or beginning of the seventh month of utero gestation. The causes are-(1) Those which act directly upon the womb and induce the expulsion of its contents;



(2) those which occasion the death of the foetus, and thus lead to its extrusion as a foreign body. In regard to susceptibility to the influence of the former, there is a vast difference in women. Those of extreme irritability of the nervous system are by far the most liable to the accident from this class of causes. Among those we may reckon diseases affecting the womb, such as tumours within its cavity or its walls, ulceration of the cervix, rigidity of its fibres resisting the distension necessary to the accommodation of the growing foetus contained within it, strong and sudden mental emotions, irritation of nerves even although not in immediate proximity to the uterus (as that of the trifacial by the extraction of a tooth, those of the lower bowel by the existence of worms); accumulated feces, violent purgation, or dysentery. All these may give rise to abortion by plenty exciting contractions of the womb. The same, perhaps, may be said of congestion of that organ through excessive sexual excitement. Whatever, by reflex action, powerfully excites the uterus-as injuries to organs or parts in sympathy with it, whether accidental or operative- may give rise to abortion.

2. The causes which directly or indirectly destroy the life of the foetus are also very numerous. Among them may be reckoned falls detaching more or less extensively, the placenta; blows upon the abdomen; haemorrhage from whatever cause; acute, and especially eruptive, diseases of the mother; idiopathic morbid conditions of the foetus itself, either in acute or chronic form, arising, it may be, from taint inherited from, one or both parents; also violent exercise, fatigue, fright, over-reaching, sudden shocks, dancing, or tight-lacing.

When the life of the foetus is destroyed its early extrusion from the uterine cavity is mostly inevitable; so long as foetal life is intact, the functions to the healthy womb are in perfect harmony with the development of the ovum contained within it, but the moment that the life of the foetus ceases the ovum becomes a foreign body, and as such, produces an abnormal irritation to the nerves supplying the organ which before felt only a healthy stimulation from its presence.

Many times abortion is produced by mechanical violence or violent agents. This is very harmful and injurious. Life commences at the moment of conception, and it is, therefore, a criminal action to destroy this innocent life. Intentional abortifacients to all purposes murder in the first degree. Let nothing entice a mother to take this life of her own offspring, even to hide shame as it is a living being from the time conception takes place, and nourished from the mother's blood. To destroy a life before birth is just the same as destroying a life after birth.

Apart from crime, however, the maternal instinct of the mother and sufficient regard for her own health should prevent any and all attempts of this character. Abortion is always likely to produce serious results- inflammation and weakness of the womb and kindred disorders of the generative organs, are almost sure to result, with constitutional diseases, prolapsus, ulceration, and shattered nerves, which frequently resist the most skillful medical treatment. Sometimes blood poisoning will follow from retention of the placenta and membranes of the foetus, which may end in broken health and a long life of suffering, or in immediate death.

**SYMPTOMS**, -Chills, a feeling of lassitude, debility and depression of spirits, feeling as if the menses were coming on, sensation of weight about the hips, back, thighs, and lower part of the abdomen, nervousness, faintness, bloody discharge, haemorrhage, pain.

The symptoms vary with the different month of gestation. This is an important stage of the case, and one in which judicious treatment will almost to a certainty prevent a miscarriage. The patient must remain on a hard bed. If haemorrhage sets in, low the head and elevate the limbs. Cold compresses can be applied externally to the parts. If this is not effective, use one gallon of hot water as an injection. Bathe the feet and limbs in warm mustard, or salt water, and rub hot bricks to the feet. Guard against any bodily and mental agitation. Give Cinnamon and Capsicum to drink, as follows :-Put 1/4 teaspoonful of Cinnamon and a pinch of Capsicum in a cup of boiling water, and give one or two tablespoonful every ten minutes.

**PREPARATION FOR LABOUR.**-The prospective mother should have the best room in the house, sunny. and well ventilated, and, above all things, clean.

Cleanliness is most important, no matter how humble the home may be. I have seen poor homes with only two chairs, a table, and a bed. The floor, chairs, table and bed were spotless and clean. Again, I have been in homes where everything was filthy.

Everything should be in readiness two or three weeks before. The whole process of labour, properly considered, is a conservative process, the tendency of which is to prevent sepsis. Nature's processes in labour are from within, outward. The foetus starts on its journey through the parturient canal from the sterile uterine cavity, passes through the aseptic cervix, continues on its way through the sterile vagina, and only at this point of final expulsian comes in contact with a septic surface. During, and after, the journey of the foetus Nature has provided safeguards against infection by the increase of germicidal vaginal mucus and the flushing of the canal from within outward, by the aseptic saline liquor amnii, and by a second flushing of aseptic saline blood and liquor amnii at the termination of the second stage. At the third stage the cleansing process is completed by the outward passage of the placental mass (or after-birth) and the subsequent flow of blood. Then follow Nature's processes to close the open blood vessels and lymphatics. Here we see the importance of non-interference except in case of positive indication, and of the use of asepsis and antiseptic precautions. Symptoms often manifest themselves, and last until after the child descends into the pelvis. Then a sense of relief is experienced several days before labour sets in by relief of the upward pressure upon the stomach, by which breathing and digestion are improved. The woman usually feels active. The sinking of the womb, by pressing upon the rectum and bladder, provokes a frequent desire to urinate, and a discharge from the vagina, and slight pains about the hips and loins may be felt.

In many instances, especially in the first pregnancy, slight contractions of the womb will be felt at various times during the day, and night, for about one or two weeks before confinement lasting a few moments at a time. These feelings may occasion much anxiety. The patient need feel no alarm, for these contractions do not forebode evil, but are generally good. They are preparing the uterus for its labour, rendering delivery short and less painful. In a great many cases labour pains come on suddenly and when not expected.

**EXPPELLING FORCES,**-The expelling forces consist of the voluntary and involuntary. The voluntary forces are controlled by the anterior and lateral abdominal muscles, the diaphragm and the pelvic floor. The involuntary consist of the contractions of the uterus, and the round and broad ligaments.

In the voluntary forces, the abdominal muscles and diaphragm in contracting increase the intra-abdominal pressure and give efficient assistance to the efforts of the uterus. These forces come into play in the second stage of labour and are first voluntary, but later on become involuntary.

The stages of labour are divided into three periods :-1st, Dilatation; 2nd, Expulsion of the foetus; 3rd, Placental delivery and uterine contraction and retention. The first stage extends from the onset of true labour pains to complete dilatation of the os.

**FALSE LABOUR PAINS** are the normal, intermittent uterine contractions of gestation occurring more and more frequently with greater intensity, and accompanied by pain. They are often caused by a temporary indigestion or rectal distension, and are often relieved by a laxative or enema. They are distinguished from true uterine pains by their temporary character and irregularity, being felt generally over the abdomen, instead of in the lumbar-sacral region or just above the pubis and by not progressing in frequency and severity, and in not causing any hardening or dilatation of the os.

**TRUE LABOUR PAINS** cause the patient to assume a variety of attitudes. The patient is restless, and walks about from place to place emitting cries on the occurrence of a pain.

The pains at first are not very annoying, occurring about every half-hour, and are accompanied by pressure sensation, but generally increase in severity, and are due to contraction of the uterus. They usually commence in the back and pass round to the thighs and lower pelvis, occurring at regular intervals, each pain lasting a few seconds. As the pain subsides, the hardness of the abdomen relaxes. These are generally called grinding pains, and are not accompanied by any bearing down. These pains are very annoying, the woman often becoming despondent and very irritable during their continuance. During this period the dilation of the mouth of the womb is going on very slowly. When the mouth of the womb has been well dilated by the grinding pains, the efforts naturally begin to be strongly propulsive, and then the pains extend around the body and settle in front of the pelvis. The pains then increase in force and frequency, and their propulsive force becomes very strong. Nature now calls on the woman to bear down of her own will, and she becomes more vigorous and calls for help or some thing to pull on, more and more earnestly till delivery is completed. The first pains last for about 15 to 20 seconds, with intervals varying from 15 to 30 minutes. As the child's head advances through the vagina and presses against the soft external parts, the pains become almost continuous and full of cutting agony.

**DURATION OF LABOUR.**-Free perspiration and deep breathing is very necessary in labour. Deep breathing increases the strength and endurance of the patient, increases capillary circulation and prevents hemorrhage. Perspiration removes all fear of fever and other unpleasant symptoms. The onset of true labour is not always readily determined. Occasional false labour pains are often experienced for days, or even weeks, before true labour pains can accurately be determined. Shortening and dilation of the cervix often go on during this time. On the other hand, active labour may cease entirely for hours during the first stage, without harm to mother or child. Labour is generally one-third shorter in a multipara (one who has borne children) than in a primipara (one who has never borne children) on account of the soft parts offering less resistance after previous labours.

The duration of labour varies widely in different individuals. The majority of all labours end within six hours, but a natural labour without the least accident to mother or child may not terminate under 48 hours or even more. A woman bearing her first child before the sixteenth year or after her thirtieth year generally has tedious delivery. A woman who has had children may expect a shorter time than one who has had none. As soon as labour begins everything should be left to the professional attendant's supervision. In the meantime everything should be in readiness. Have a complete change of underwear, towels, and extra sheet for use; also sterilised gauze and cotton, and a plentiful supply of boiled water, hot and cold, kept covered and free from dust and dirt.

Personal cleanliness is of first importance and the woman should have her bowels moved and pass urine before taking her bed. An enema of tepid water may be used. Dress should be light, loose fitting and moderately warm. Stockings should not be gartered. The woman generally suits her own convenience as to lying down. She may sit in a chair, or walk about the room till labour pain is well advanced.

The bed should be free from all draughts, and accessible from both sides, and not too low. Soft beds should be avoided. A hard mattress is best. Over the middle third of the mattress a piece of rubber sheeting or oil cloth, one yard or more square, should be firmly pinned with safety pins. Cover the mattress with a clean sheet pinned down at the ends with safety pins. This is the permanent bed. Over this, on the middle of the bed, place a second rubber sheet of the same size, pinned down as not to wrinkle under the patient. Over this place an absorbent pad, which is made of several thicknesses of absorbent cotton covered with gauze. Or better still, use several thicknesses of paper covered with gauze. This retains the discharges from the vagina, and as use can be removed and burned, and another one put in its place until labour is completed. The second rubber sheeting, which affords protection to the bedding may be removed without fatigue or trouble to the mother after labour. An abundance of clean sheets and cloths should be at hand for use in removing discharges and then burned.

ARTICLES TO BE IN READINESS at the time of labour :-1. An abundant supply of hot and cold water. 2. Two clean bowls for hand cleansing. 3. A small bowl for vomited matter if required. 4. A bowl for the placenta. 5. Pitcher's for hot and cold antiseptic water. 6. A clean cup with bolic acid solution and gauze, to clean the baby's eyes and mouth. 7. A half dozen freshly-laundried old sheets to serve as bed pads, 8. An abundant supply of freshly-laundried sheets and towels. 9. A change of night-clothing, warmed, for the mother. 10. A warm blanket to receive the baby. 11. Thread. 12. Scissors. 13. Hot-water bottle. 14. Syringe, 15. Bed-pan. 16. Vaseline. 17. Olive oil. 18. Boric acid solution. 19. Green and Castile soaps, &c.

It is the duty of the nurse in charge to have everything in readiness. If no nurse is to be had, the mother should be instructed how to prepare, and be in readiness for any emergency that may arise.

CARE OF THE MOTHER AND BABY,-The baby being born, and breathing established, should be warmly covered and left until pulsation in the cord has ceased, as too early severing of the cord deprives the child of much vitality. The mother's blood, as long as it is propelled through the umbilicus, belongs to the child. It pulsates for several minutes after breathing begins, allowing the system to become accustomed to the new function of respiration. The cord should then be tied about two to three inches from the abdomen, with coarse silk, or very fine tape, to prevent bleeding. The mouth and eyes should be washed with boric acid solution, to remove any mucus in the mouth, or infection in the eyes from the secretions, and the child wrapped in a warm flannel and laid in a warm place on its right side. If the baby should be born apparently dead, or not breathing, a few smart blows must be given on the thighs and on the back, or cold water sprinkled on its chest, back and face. The child must be made to cry hard. By this simple remedy thousands of children have been saved from threatened death. The natural cry assists in establishing the new function of breathing. After the child has been expelled, there remains in the uterus the placenta-membranes composing the sac that held the waters, and the umbilical cord. This is called the "after-birth" or the "secundines. "

In a few cases, it is expelled almost simultaneously with the child but in the majority of cases it remains until the return of light labour pain which cause its expulsion. As soon as the child is born and laid down, the accoucheur, or accoucheuse, should place one hand upon the mother's abdomen, and if the uterus is then found contracted into a hard mass there need be no fear of unusual flooding. The crede movement is very beneficial at this time, and helps to cause contraction and at the same time expels the after-birth. After the placenta has come away, the wet clotting should be carefully slipped downwards from under the mother, and all discharges cleaned up, removed and burned. A fresh clean pad can be placed over the dry sheet next to the bed as previously described, and 11. napkin, or several thicknesses sterilised cotton, should be placed next to the vulva, to receive discharges.

BANDAGE AFTER LABOUR.-While we do not in this enlightened age consider it necessary to use a bandage after labour, yet there are those who prefer to do so, and in that case should be made of thick linen similar to sheeting, about 11/2 yards long and sufficiently broad to comfortably support the abdomen. Two or three folded diapers should be placed over the region of the womb, and then the bandage should be neatly and smoothly applied around the lower portion of the abdomen, to keep the diapers firmly fixed in position. The bandage should be put on moderately tight, pinned on the side with safety pins, and retightened every night and morning, or oftener, if it becomes slack.

Women who go about too soon after confinement frequently suffer from falling of the womb. An abundance of exercise during pregnancy, and perfect rest for a few weeks after labour cannot be too strongly insisted on.

The uterine contractions, called after-pains, are often acute. Massaging the abdomen or the application of a hot-water bottle, will often give relief. After the mother is cleaned, and her bed made tidy, she should be warmly covered with blankets and left to rest.

It is well to take care of the baby, and make it comfortable as soon as possible after it enters into this world. Its whole body is covered with a thick, whitish, unctuous matter which is insoluble in water, and which renders the body very slippery. This will be loosened by the application of a sweet oil bath, but olive oil is better. Anoint the entire body. Then, after wiping down with a soft cloth, roll the child up in soft blankets, head and all, and put it away to sleep. The oiling nourishes the body, removes the paste-like substance, and also removes the soreness and tenderness experienced by all infants, caused by the many hours of contraction experienced in its passage into the world.

It is much better not to use water for three or four days. I have found, in my experience with babies, that a daily oil bath acts as a food and renders the skin healthy. It is not necessary to wash and scrub a new-born baby as some of our ancestors did.

THE CARE OF THE NAVEL is very important. After carefully ascertaining that it no longer bleeds, take a piece of soft linen or gauze, about three inches square, cut into the centre, and wrap it neatly around the cord. Place this on the abdomen of the child, and secure by means of a flannel belly-band applied neatly and smoothly so as not to injure the very delicate skin, and fasten with small safety pins at the side. A clean diaper should next be neatly put on, and a fine woolen shirt, and a blanket to cover the baby's feet. A nightdress over this is sufficient clothing. Then wrap in a warm blanket. A babe's clothing should be light, warm, loose and as free from pins as possible. Many infants' clothes are both too long and too cumbersome.

The parts that should be kept warm are the chest, bowels and feet. The dress should be loose, yet fitting snugly, so as to prevent pressure upon the blood vessels which impedes the circulation, and hinders proper development of the parts. It should be loose about the chest and waist, so that the lungs and heart may have free play.

The navel string generally separates from the child in from three to five days after birth. If it does not come away at the end of a week, nothing should be done to cause the separation. It should always be allowed to drop off.

In my practice I remember one case where the navel did not separate for 14 days, but finally came off, leaving a nice clean surface. Meddling with it frequently costs the baby much suffering, and sometimes its life. The navel is sometimes sore after the separation, in which case, a little boric acid on cotton, night and morning, will heal it.

NURSING should not be delayed, as it often becomes difficult to train the babe to take the nipple. As soon as the babe is able to take the breast, as it stimulates the activity of the unused digestive system, and acts as a cathartic. It also relieves the breasts and thus benefits the mother. For the first few weeks the child should be fed every two hours. The nipples should be wiped before and after each feeding, with a solution of boric acid and thoroughly dried.

HYGIENE AND CARE OF THE MOTHER.-After delivery the woman should be moved as little as possible. The room should be moderately darkened, and kept very quiet. No visitors or talking should be allowed, beyond what is really necessary. The woman needs rest and quiet, and the room should be even warmed, dry and ventilated.

THE DIET should be light for the first few days. The first day it should consist of nicely-made and well-boiled whole-milk gruel, or a food made from the following :

Slippery Elm Bark, in very fine powder	2 oz.
Marshmallow Root, do	2 oz.
Cinnamon Bark, do.	1/4 oz.
Fine Lentil Flour	8 oz.
Fine White Sugar	8 oz.

Mix well together. Put one tablespoonful into a bowl; add half pint of boiling water, stir well and then add the same quantity of hot milk, and stir again. A little milk, bread and milk, toast and butter may be taken, taking care not to overload the stomach with too much fluid.

Second day-Breakfast :-toast and butter, Raspberry Leaf tea, or gruel; Dinner :-toast, with poached or boiled egg, Raspberry Leaf tea or English Herb tea, or warm milk, or milk toast, boiled rice, dry toast, or tapioca. The bowels should be moved every 24 hours, or at the latest on the second day, after labour if necessary using an enema. Solid food may now be taken. If urine is not voided in about eight or ten hours after labour, make a teat of Uva-Ursi or Queen of the Meadow, and drink warm. A daily sponge bath in the morning is beneficial; and all linen about the bed should be changed daily. For a number of days after confinement there is a sanguinous flow from the uterus known as lochia, which varies in different women. Absolute cleanliness at this time is very important. Sanitary pads should be kept over the genitals and changed about every four hours, or oftener as required. Infection from many sources is liable to take place, followed by blood-poisoning, which may end in death to the mother. An ounce of prevention is worth a pound of cure.

AS TO THE TIME a woman may safely leave her bed, no set rule can be given. We should regard the condition and strength of the patient. There are some women who may safely sit up, and even walk about the room, at an earlier period than others. In any case the mother should not attempt to leave her bed until after the tenth day. Then she may sit up but must not attempt work for three or four weeks, in order to let Nature strengthen and build her up for her normal duties. It is at this time that a woman needs the very best care that can be given.

A VERY COMMON OCCURRENCE IS CAKED BREASTS, on the second or third day after the birth of the baby. They are very painful, and cause trouble and disturbance of the general health. One or both breasts become congested, If the milk is abundant the baby will not take it freely; the milk hardens and the breast becomes "caked," is hard, tender, red, and very painful. The patient suffers with headache, feverishness, and constipation. If the flow of milk is not restored within a very few days, suppuration will take place, and an abscess form, which often proves serious.

This may be avoided by keeping warm, and protecting the breasts in cool weather with an extra covering of flannel. If the breasts show signs of caking or hardening, the milk must be drawn as freely as possible. If the babe cannot do it, the breast must be emptied by the use of a breast pump, every two hours. Hot applications may be applied continually, or a mixture of sweet and Tincture of Lobelia; or the breasts may be massaged with Lobelia alone. Chickweed Ointment used freely, is superior to anything and will not injure the milk glands. People often use Camphor in this trouble. It must not be used, as it is very injurious to the milk glands. It paralyses the glands and leaves the breasts withered for life. Let the patient drink a warm tea of Raspberry Leaves and Ginger, or Pennyroyal and Catnip Tea, and so stimulate the circulation. Keep the bowels regular. If an abscess forms poultice with Slippery Elm, 1 part; Lobelia, 2 parts; Gin 2 parts. After the abscess has opened, the poultice must be continued. After the fever abates, the patient is usually feeble and nervous. Her strength should be sustained by tonics, such as Spice Bitters, sometimes called "Ladies' Spiced Bitters," and is the best general female tonic that can be used.

THE OBSTETRICAL NURSE.-The nurse fills a very trying position, and to be successful she must be specially adapted to the chosen calling. She has two patients under her care, and many demands are made upon her time, strength, and good nature, both by day and night.

Consequently she must be cheerful and obliging as well as neat, trustworthy, and entirely truthful. She must be scrupulously neat and cleanly in her habits and instincts. When in attendance on a case she should wear a washable dress, made with detachable sleeves, which can be taken off when she has any duties to perform about the patient. An apron must always be worn. Visitors should not be allowed in a lying-in chamber for a week or two-until the patient is strong.

Keep the room well ventilated, as fresh air is very important and most essential for mother and child. Allow the mother and child plenty of sleep. The child should sleep by itself in a crib or cradle.

**BABY'S BATH.**-A special bath-tub should be kept for the baby. Do not be afraid of water. It is one of the best strengtheners to a child's constitution. Wash the infant every morning. (A clean baby is healthier and happier than a dirty baby.) It will then go to sleep peacefully and wake up refreshed and happy. The bath should be about 95 degs. to 100 degs. F., and should be given with tenderness, and without rough handling. It should be given as nearly as possible about the same hour every morning, but never immediately after a feed. An hour should elapse after taking food. A good plan is to give its bath, then afterwards its bottle; after which put it to sleep. First wash the eyes and mouth with clean boiled water, using a piece of gauze or cotton. Then wash the face and head gently with a soft cloth, drying all the parts carefully and well, especially the ears and neck. If not properly dried the parts will chafe and cause raw surfaces, the baby's skin being very tender. Follow by sponging the whole body. Only a small part of the body should be bathed at a time, The rest being kept covered. Be sure and wash the armpits and thighs and groins. As the child grows older, take the sponge and allow the water from it to stream all over the body, particularly over the back and loins. After every bath, the skin must be thoroughly but quickly dried with warm, dry, soft- towels. Then powder the parts that are likely to be chafed-around the neck, arm-pits, groins, and behind the knees-with fine Slippery Elm Powder.

The nurse should wear a flannel apron, or may have a piece of flannel or blanket spread over her lap. The bathing must be done in the warmest part of the room, before the open fire or stove, care being taken that the infant does not get chilled. It is better not to give a tub-bath till the tenth day, as it is something of a shock, and its repetition tends to prevent healing and dessication of the umbilicus, or cord, and may result in infection. Soap should be used moderately, and chiefly about the genitals and axillae. Marshmallow soap is to be preferred. The cord should be dusted with fine Slippery Elm Powder, and kept dry. After separation of the cord, the umbilicus should be kept perfectly clean. In addition to the regular daily bath, the lower parts of the body should be sponged after each bowel movement.

Take good care of the baby's skin. If the skin is irritated baby will be uncomfortable. An uncomfortable baby is rare healthy baby. The bath water should be soft and free from sediment. A teacupful of bran tied in a cheese-cloth agitated in water is good. Where there is nettle-rash or prickly heat, add a tablespoonful of vinegar, or one teaspoonful of bicarbonate of soda, to the bath water, and afterwards dust the body with Slippery Elm Powder. Use a flannel wash-rag or soft sponge, towels of fine and soft material. After use, thoroughly wash and dry for the next time. The baby should be kept at a uniform temperature, as too great- heat is depressing and injurious. Diapers should be removed immediately when soiled or wet, and should not be used again until washed and boiled-otherwise if used a second time, they will cause chafing and tenderness of the parts. They should be made of old soft linen or cotton diaper cloth. **CLOTHING.**-The clothing should be light, warm, loose, and free from pins. Many infants' clothes are both too long and too cumbersome. A flannel bellyband ought to be worn until the child is three months old. It should be moderately, but not tightly, applied. If tight, it interferes with the respiration, leading to defective development, of the chest and abdominal wall and also interferes with the bowel, and affects nutrition. The handkerchief should extend from the pubis to the axillary region. The under-garment should be made of nice fleecy material-Canton or soft flannel, princess style, reaching from the neck to ten inches below the feet, with sleeves to the wrists, seams all smooth, hems, at the neck, wrists, and bottom.

At night, the dress should be a plain cotton flannel nightdress, diaper and belly-band. The night dresses should be longer than the day dresses. Long woolen socks may be worn to keep the little feet warm. When baby's feet are cold, it becomes very restless and fretful, often leading to cold in the bowels, or colic or wind on the stomach.

**INFANT FEEDING**-Two or three hours after delivery is completed, and the mother and baby comfortable, the baby may be placed to the breast.

The suction exerted by the infant at this time favours contraction of the uterus, assists in the formation of new milk, and abstracts the colostrum from the breasts. The latter substance is supposed to exert a favourable influence on the digestive apparatus of the infant. Whenever possible, the mother should feed her own child, since the nutriment thus supplied is unquestionably the most natural and wholesome food for the earliest period of life, and it can be proved that involution is more satisfactory in women who thus feed their children. Unfortunately this is not always possible, for a variety of reasons, such as anaemia, abscess of the breast, certain diseases of the mother, &c.

The baby should not be fed oftener than every two hours during the day for the first, two or three months; and every four hours at night. Regularity in the times of feeding is by far the most important point in case of the baby. Life itself depends upon the food. It is a great mistake to feed the baby every time it cries. The stomach must have time for digestion, and afterwards, time for rest.

The mother must exercise her judgment in feeding the child, giving only as much as it needs, and remembering that children vary in eating just as grownups do. A delicate child may not require more than half as much as one that is strong and vigorous. The stomach of an infant a week old holds only about three tablespoonfuls, but there is a very rapid increase in the capacity of the stomach during the first two months, and a gradual increase thereafter. The stomach is so easily distended that much more than this can be crowded into it by overfeeding, to the great discomfort and injury of the child. Too many children are overfed, or are permitted to gorge themselves, and die from the effect. No matter how much food is put into the stomach the child is nourished only by the amount which is digested. The extra quantity does harm, instead of good, causing pain, vomiting, colic, and diarrhoea. A good flow of milk is frequently not established until the third or fourth day. There is a tendency, especially with young mothers, to give food to infants during the time that the flow of milk is being established.

This often leads to serious illness. Nothing should be given besides the mother's milk except a little pure water. The baby often suffers from thirst and this may be mistaken for hunger. A teaspoonful of warm or cool water should occasionally be given. Never give ice or cold water.

The breasts and nipples should be kept clean, and one breast given for each feed alternately. For example, the right breast at 1 p.m., the left breast, at 3 p.m., right breast at 5 p.m., left breast at 7 p.m.

Crying during the first few days is perfectly natural, and even beneficial, to the child. It does not always indicate illness or hunger. Medicines should not be given. It is easy to get a baby into good habits at first, but hard to get it out of bad habits if once contracted. Medicine must not be given to nursing mothers except by direction of the physician.

Great fatigue, exhaustion, excitement, sudden fright, grief, anger or passion of the mother, have occasioned illness of infants. Under such conditions it is often better to draw the milk and avoid nursing until the mother regains self control. Never give a baby any medicines unless really needed. They are apt, to upset its stomach. What benefited your neighbour's baby may kill yours. If a baby shows signs of colic, don't dose it with paregoric, whiskey or soothing syrup. Colic is often a symptom of some condition which needs attention. It may be due to overfeeding, constipation or cold hands and feet. Keep the hands and feet warm, and bind the abdomen with a flannel bellyband, summer and winter. Regulate the diet, and regulate the bowels. If needed, give Syrup of Rhei or Neutralizing Mixture, and especially warm water: to drink at all times during the day.

An admirable remedy for relaxing costive bowels is to give a teaspoonful of water every morning when the baby awakes. Regulate the dose according to the age of the child. When the baby cries with colic, turning it over on its bowels and massaging its back will often give relief. A warm bath acts as a fomentation to the bowels.



Another excellent remedy is the hot compress. Soak a piece of flannel folded into two or three thicknesses in warm water, wring out, and apply, as hot as the child can comfortably bear it, to the bowels. A good way to test the heat for a baby is to apply the hot flannel to your face, when a comfortable heat for the face will be right for the baby.

The baby's room should be bright, sunny, dry, and have a southern exposure. Pure fresh air is of the highest importance for good health. A new-born baby will sleep 18 to 20 out of the 24 hours, but as it grows older will sleep less. Regularity in sleeping hours is as important as regularity in feeding. Do not get the baby into the habit of being rocked or walked to sleep. To walk the floor night after night, or to be obliged to sit up with a healthy child and sing it to sleep, is uncalled for. Providing one is sure that the baby is not sick, it should be put to bed and not taken up again to induce it to sleep. It is befit for the baby to lie on one side, then, if a little milk is vomited up, it will not choke it. After it has slept on one side for some time, it rests it be turned over upon the other side. Never neglect to remake the bed every time baby is taken up. If the sheath become wet or soiled, they should be changed no matter what hour. Much trouble may be avoided by regularly taking up the child at time of feeding, and encouraging a thorough evacuation of the bladder.

**WEANING THE BABY.**-The natural and best means ladder normal conditions, of furnishing nourishment to the infant, is feeding from the mother's breast. Not only is the breast milk the best food for the baby, but it is equally true that the natural nursing confers great, advantages upon the mother; for, in consequence of the sympathy which exists between the breasts and other organs, if the functions of one are not fulfilled, the others are likely to suffer. Fortunate, indeed, are both mother and child if the mother can furnish and the child draw from the breasts and abundant supply of pure, health-giving, tissue-building food.

Unfortunately, under the disturbing influences of modern civilization, normal conditions are the exception rather than the rule, and very many mothers are prevented by health or circumstances from fulfilling their natural duties with advantage to their children. Deficient or defective lactation, disease, exhausted vitality, or other causes, frequently render maternal nursing impossible or undesirable, so that it becomes necessary resort to hand or artificial feeding. Again, few mothers are able nurse their baby after nine months without, too much drain upon themselves and injury to the child. the child should be gradually weaned when the mother is unable to nurse, or when the milk continues to disagree with the infant, or does not contain sufficient nourishment, or when the mother is a consumptive, or has severe hemorrhage, blood-poisoning or kidney disease; or suffering from severe chronic disease; or is pregnant.

**HAND-FED CHILDREN.**-Much of the mortality following hand-feeding may be traced to unsuitable food. Among the poor classes, especially, there is a prevalent notion that milk alone is insufficient, hence the almost universal custom of administering various farinaceous foods, such as corn-flour or arrowroot, and that even from the earliest period. Many of these foods consist starch alone, and are therefore absolutely unsuitable on account of the total absence of nitrogenous elements. Reason proves that the object to be aimed at in hand-feeding is to imitate as nearly as possible, the food which Nature supplies for the newborn child.

**ARTIFICIAL FEEDING.**-Feeding is by far the most important part of the care of the baby. Life itself depends upon the food. At birth the stomach holds about 1-oz. or 2 table-spoonfuls, and is so easily distended that much more than this be crowded into it by overfeeding, to the great discomfort and injury of the child. From the first, a baby naturally feels hungry and thirsty at times, and may also sometimes suffer pain. It has only one way of making these troubles known and that is by crying. Too often this crying is hushed by nursing, or feeding, when perhaps the poor little sufferer is not hungry at all, and the wail proceeds from an entirely different cause.

Too frequent and too liberal feeding distends the stomach to twice or thrice its natural size, and the baby is uncomfortable and cries or vomits in self defense, because there is no room in the stomach for the liquid that has been poured into it. The overplus may irritate the bowels and give rise to diarrhoea. The following table shows the quantity of food, and frequency of giving it, for a bottle-fed baby:

Age.	How often to Feed.	Amount to be given each Feeding,
1 week	Every 2 hours	1 ounce or 2 tablespoonfuls
2 to 4 weeks	Every 2 hours	1 1/2 ounces or 3 tablespoonfuls
1 to 3 months	Every 2 1/2 hours	3 ounces or 7 tablespoonfuls
3 to 6 months	Every 2, hours	4 1/2 ounces or 9 tablespoonfuls
6 to 12 months	Every 3 hours	7 1/2 ounces or 14 1/2 tablespoonfuls
12 to 18 months	Every 3 hours	9 ounces or 18 tablespoonfuls

No matter how much food is put into the child's stomach it is nourished only by the amount which is digested. The extra quantity does harm instead of good, causing pain, vomiting, colic, and diarrhoea. More infants die from too much food than from too little. It is commonly believed that there is a greater mortality among bottle-fed babies than among those raised upon breast milk. This may have been true in former years, but under the improved conditions of infant-feeding as now practiced, bottle-fed children have an equal enhance with those nourished upon breast milk. Having decided that artificial feeding must be resorted to, we must select food which is best suited for the infant, and which gives best promise of healthful development.

Cow's milk, properly diluted and modified, is the best substitute for mother's milk. But cow's milk and mother's milk are not alike; and the former, even under the most favourable conditions, is of such a nature that many infants cannot digest it.

MOTHER'S MILK contains four components, combined in proportions suitable to the digestive power of the infant. First.-The curd or casein (proteid), whose function is to supply material for growth, for renewal of waste, for formation of nerve and other tissues of the body. Second.- Cream (or fat), essential to the formation of nerve and muscle tissue. Third.-Sugar (or carbohydrate), whose principal office is to supply heat and energy to the growing child. Fourth.- Salts, which supply constituents necessary to all the tissues and fluids of the body. Cow's milk contains these four things too, but, they are not combined in the same proportions as in mother's milk.

First--There is twice as much curd in cow's milk as in mother's milk. The curd of the former when it enters the infant's stomach, is formed into a tough, coherent mass, too hard to be softened and broken up by the digestive juices. Often, constipation is the result. The curd of the latter is soft and flocculent, and easily acted on by the digestive juices, and is then made readily assimilable by the infant organism.

In the second place, there is only half as much sugar or carbohydrate in cow's milk as the infant needs.

Third-The salts of cow's milk are not of the right kind.

Fourth.-Cow's milk is acid in reaction, while mother's milk is alkaline.

Therefore the following things must be done to cow's milk to make it digestible for the infant :-The proportion of curds must be lessened ; the hard curd must be softened; the sugar must be increased; salts must be changed and the reaction must be made alkaline.

The following are required:

First.-Absolutely pure water with which to dilute the milk.

Second.-Lime-water to overcome the acidity of cow's milk, and to lessen the consistency of the curd. (There are some infants with whom lime water does not agree. If used too freely it may cause constipation. Vichy water is a good substitute for lime-water, and should be used if the latter disagrees. Better than either of these is about 2 drops of Anti-Spasmodic Tincture in each bottle of milk, or about half-a-teaspoonful of Composition Tea in each bottle.)

Third.-Milk sugar to make it conform as nearly as possible to mother's milk.

Fourth.-Slippery Elm water to dilute the milk. It makes the curds of the milk more easily digested, and at the same time is nutritious, and helps to keep the bowels in a healthy condition. Oatmeal water is used in the same way, especially when a laxative effect is needed.

MIXTURE.-Sugar of milk, 1 oz.; Slippery Elm water, diluted, 20 oz. When dissolved, add 2 oz. of the milk (bottle milk). Keep the milk cool in glass jars (on ice), closely sealed from any contamination. Take each feed from this quantity when needed, and warm it to blood heat.

Milk should come from a herd of healthy cows, which are fed on good grain and grass, and are properly cared for, and is preferable to milk from one cow, as diseases of cows are so frequent. If one cow is diseased the baby taking from this cow is apt to acquire the disease, while if this cow be of a herd, the danger is reduced to the minimum. Then the milk from a herd differs less from day to day.

The fresher the milk the more easily it is digested by the infant. Milk over 24 hours old must not be used. When the child has had enough, remove the bottle from sight, and do not feed him again until time for the next meal. The nipples and bottles must be scrupulously clean. Immediately after each feeding, wash the bottle with warm water in which is dissolved a little soda bicarbonate or cooking soda. Scrub the inside of the bottle with a brush for the purpose and rinse thoroughly.

Turn the nipples inside out and wash and boil them thoroughly. Always use the red or black nipples, as they are the best ounce each day, the bottles should be boiled. Leave bottles and nipples in cold water until used. One cannot be too particular in regard to absolute cleanliness of bottles and nipples; one single bottle of tainted milk may cause severe and even fatal sickness. Never use nipples connected with long glass or rubber tubes.

Hold the bottle for the baby throughout the feed. Do not coax him to take more food than he wants, and do not allow him to drink from the bottle longer than 20 minutes. If it takes longer, there is something the matter with the baby or with the nipple. If there is any food left in the bottle, throw it away. Do not give it to the baby later. When the baby has diarrhoea-either with or without vomiting-stop all food at once. Give it a few drops to half a teaspoonful, according to age, of Neutralizing Mixture in a teaspoonful of water, and allow it boiled water to drink.

Every baby needs 20 hours sleep a day in its first month, and not less than 10 up to the twelfth month of its first year. It should sleep alone, not in a cradle, but in a crib. If no crib is available a clothes blanket or a box of sufficient size is a good substitute.

An expensive mattress is not necessary. A simple mattress made of Excelsior and covered with a heavy blanket will answer very well. A sufficient quantity of clean bed-clothing should be provided. The room should be darkened but well-ventilated; the windows should always be open at the top at least 6 inches, except in the coldest weather. If the baby cries when it should be asleep, it is probably sick-overfed, or hungry.

All children should take a nap of from one to two hours in the middle of the day until they are 6 years old.

## **CHILDHOOD.**

### **Teeth.**

The teeth are a frightful source of suffering and disease. They are styled "our first and last plague." The period at which dentition commences is uncertain. A baby may begin teething when several months old; some have cut teeth at three months.

Dentition is the most important period of a child's life, and is the exciting cause of many infantile diseases.

During this period he requires constant and careful watching. When we consider how the teeth elongate and enlarge in his gums, pressing on the nerves and the surrounding parts, and how frequently they produce pain, irritation, and inflammation; when we contemplate what sympathy there is in the nervous system, and how susceptible the young are to pain, no surprise can be felt at the immense disturbance and consequent suffering and danger frequently experienced by children while cutting their first set of teeth.

The complaints or diseases induced by dentition are numberless, affecting almost every organ of the body--the brain, occasioning convulsions, water on the brain, &c.; the lungs, producing congestion, inflammation, coughs; the stomach, exciting sickness, flatulence, acidity, &c.; the bowels, inducing griping, costiveness, purging; the skin, causing eruptions.

If there is diarrhoea, during teething or at any other time, it is due to some cause--it may be due to some undigested food, acidity, or depraved motions. The best plan is to remove the cause by giving olive oil, or, the Neutralizing Mixture for the bowels. Rub olive oil well over the abdomen twice daily, and regulate the diet. A child living in a large city should be sent to the country. If convulsions arise, first dash cold water all the child's face, and sponge the head with cold water. As soon as hot water can be procured, put the child into a bath(98 deg. F.). Let the child remain in the water for 15 or 20 minutes, then wrap in a blanket and wipe the body with a warm, dry, coarse towel.

A baby who is teething usually sucks his thumb, which is a good gum-stick, and handy. It will often quieten a cross baby, and at the same time cause the salivary glands to pour out their contents, not only to moisten the dry mouth, but to assist digestion; the pressure of the thumb eases the pain and irritation of the gums, and helps to bring the teeth through. The child will likely gain a habit of sucking the thumb, which can easily be prevented with one or two dressings of aloes and water-paste.

The two lower front teeth are usually cut when the baby is from six to seven months old- the time varies in different children. This is followed by the two upper teeth. Some babies their teeth with little trouble, others are restless, uneasy, and wakeful, especial if the child is constipated. The teeth are usually cut in pairs--first the two lower in the centre, next the two upper, then the outside two above, then the two below, next to those first cut. These teeth are usually present about the twelfth month. The cutting, however, does not always follow the above order. The first teeth always appear between the third and tenth month. Teeth are developed at birth, and grow with the infant until they pierce the gums. A series of nervous disorders occur after the fourth month and during the eruption of the teeth.

**SYMPTOMS.**--Very warm mouth; red, inflamed gums; excessive secretion of saliva, dripping from the mouth; sucking the thumb, the child trying to bite everything within its grasp; usually restlessness and fretfulness. These symptoms usually disappear after the eruption of the tooth.

For the sleeplessness and irritability and nervousness much can be done by the mother. A hot foot bath will often have a soothing effect by relieving the congestion in the head and mustard can be added to the bath with benefit; Neutralizing Compound will be beneficial ensuring a good bowel movement, and will relieve the congestion in the gums. Beware of soothing syrups, which merely dope the baby and often cause great injury.

**EXERCISES AND MENTAL FACULTIES.**--Fresh air is most essential and most important for good health.

The baby's room should be bright, sunny, and dry, with a southern exposure if possible, and should be kept at an even temperature. If summer and the weather fine, carry the baby out in the open air, a week or two after birth. But, if winter, and the weather mild, he should not be taken out until a month old. and then in the middle of the day. After three months old he should be taken out every day. The child will then become strong and healthy.

He must be well clothed and warm; never taken out on an empty stomach. When he returns give him a drink of warm water. Do not cover his face with a veil, as then it is impossible for him to receive any benefit from the invigorating effects of the fresh air. A baby should be free to play undressed upon a rug, floor, or carpet every day, where he can stretch his limbs and kick about with perfect ease. It strengthens his back and enables him to stretch his limbs and to use his muscles and is one of the best of exercises. Violent tossing must not be allowed, as it is injurious. Do not rock the baby. If you begin this habit it must be kept up; teach him to go to sleep quietly. It will save the mother from much worry.

The infant should support its head about the 14<sup>th</sup> to 16th week, and usually be able to sit alone at about 7 or 8 months; after nine or ten months he will begin to creep; and begin to talk about the thirteenth or fifteenth month. Do not urge the child to walk, but let him creep as long as he will. When his muscles are strong enough he will make the effort to walk, and will progress as fast as it is safe or desirable. Never lift a baby by his hands or arms. Thoughtlessness in this respect is liable to cause displacement of the elbow joint or shoulder, and is almost certain to strain the delicate muscles. In lifting the baby the mother should place her hands on either side of the chest, below his armpits, and gently raise him to the required position.

The centre of speech may be inactive and show no signs of development until the end of the second year. If the child is otherwise healthy no alarm need be felt. Children will study the movements of the mouths of adults and learn to note the difference in sounds, and remember the meaning of words, especially when brought into use in connection with certain objects or places. Words will be uttered in accordance with no distinct rule. The "memory" of a child will be noticed about the thirtieth week. The child will notice the absence of its mother about the fourth month, also notice the difference in voices. Tears when crying and laughing are often noticed about the eighth or tenth week.

**SIGHT.**-This is present from birth, but the eyes are very sensitive to light, and not till the fourth month do they seem to be used voluntarily.

**HEARING.**-Deafness is present for a few days. This is probably due to the absence of air from the tympanum (or drum) but when respiration is well established the hearing begins, and later becomes quite sharp. The baby does not seem to locate sounds before the fourth month.

**TOUCH.**-Sensation is present, but is dull for three months. The sense of touch is highly developed in the tongue and lips, where the "temperature sense" is also acute.

**TASTE.**-This sense is highly developed from birth.

**DEVELOPMENT OF THE NORMAL INFANT.**-During the first year the child should be weighed every week, and during the second year every other week. The gain or loss in weight from one weighing to another is the very best indication we have of the welfare of the child. Often the signal of commencing trouble is the absence of a regular weekly gain or the presence of a slight loss.

At six months the birth-weight should be about doubled, and at the end of a year about trebled. During the first six months the gain should average four to eight ounces per week, and from seven to four ounces during the second six months. From four to six pounds per year is an average gain for the next ten years. Sickness of any kind, and particularly digestive disturbances, stop the normal gain, and usually substitute a loss. Even the physiological process of dentition is accompanied by a diminished weekly gain.

**HEIGHT.**-During the first year the growth is about eight inches, an average of two thirds of an inch per month, the increase being somewhat greater during the first quarter. During the second year the growth is about four inches, and during the next ten years it averages about two inches per year. This growth, in infancy, takes place more rapidly in the extremities than in the trunk, although at birth the trunk is relatively longer than the limbs. The average height of a new-born male is from 19 1/2 to 20 inches, and of a female from 19 1/4 to 19 3/4 inches.

**WEIGHT.**-Boys average 7 1/2 lbs., girls about 7 lbs. If below 5 1/2 lbs., a very low vitality is indicated, and suggests prematurity,

**DENTITION.**-At birth the teeth are enclosed in the dental sac in the alveoli of the jaws, and their growth is upward by calcification of their roots, this growth beginning at birth. The milk or deciduous teeth are twenty in number, and are cut in the following order, although quite wide variations are frequent :

1. Two lower central incisors, at six to nine months,
2. Four upper incisors, at eight to twelve months.
3. Two lower lateral incisors and four anterior molars, at 12 to 15 months.
4. Four canines, at 12 to 15 months.
5. Four posterior molars, at 24 to 30 months.

Early teething usually means early ossification of the cranial bones; and late teething usually indicates rickets or other form of malnutrition. The second or permanent teeth are cut as follows :-1, First four molars, at six years; 2, right, incisors, at seven to eight years; 3, right tricuspid, at nine to ten years; 4, four canines, at twelve to fourteen years; 5, second four molars, at twelve to fifteen years; 6, third four molars, at seventeen to twenty five years. Except for the first four molars, the order is about the same as for the first set. In growing, the second set cause atrophy of the roots of the first set until they loosen and fall out. Particular attention should be paid to the teeth of children, Their regularity and soundness are of great importance to health, as well as being ornamental.

**EXERCISE AND AMUSEMENTS.**-Leaving children in their cribs without proper exercises has been the means of producing a marasmic or atrophic condition, due to faulty hygiene. A child of six months old should be placed on a large rug and permitted to roll or crawl at will. When infants are seven to eight months old and desire to stand, they should be encouraged to do so. This grasping and other muscular efforts stimulate the circulation, besides giving tone to the muscles. Older children should be permitted to exercise, so that there is a symmetrical development of the body.

Let the amusements of the children be outdoors as much as possible as they grow old, and let them exert themselves as much as they please. Older children should be permitted to exercise, that there is a symmetrical development of the body. Let the amusements of the children be outdoors as much as possible as they grow old, and let them exert themselves as much as they please. Their feelings will tell them when to rest and when to begin again. Let them be happy, joyous, and laughing, what Nature intended them to be. They ought to be encouraged to engage in those sports where the greatest number of muscles are brought into play, and let them shout, romp, and riot about as much as they please. Their lungs and muscles want development and their nerves strengthening. As soon as children can run, let them race for half an hour through the rooms before going to bed. Regularity should be observed, as it is very essential to health. A young child should be put to bed at 6 p.m. in the winter and 7 p.m. in the summer. An old adage and a good rule is, early to bed and early to rise brings good health and happiness. During storms children should be kept indoors. It is necessary to regulate the amount of exercise to the strength of the child. If fatigue or over-exhaustion are brought on by excessive exercise, it will be found to be just as productive of harm as under-exercise. As the child grows older a cool sponge bath every morning chills the surface and causes the infant to draw long breaths; this expands the lungs and is the best form of pulmonary gymnastics.

**DISORDERS OF INFANCY.**-Injuries often occur during birth, when labour has been tedious, or where instruments have been used, such as elongation of the head, swelling upon the scalp, and distorted features. Usually no treatment is necessary other than gentle massage. The natural shape will be regained in one or two weeks.

**DISEASES OF THE UMBILICUS.**-Bleeding from the navel sometimes occurs after birth, through carelessness in dressing, which is very dangerous. This should be watched by the nurse and a new ligature applied tightly, or fatal hemorrhage may result. The neglect of such a condition, improper bandaging, or uncleanliness in this region is liable to cause not only convulsions but blood-poisoning and death.

Great care must be used to prevent the child from crying, as crying aggravates the abdomen and irritates the umbilicus. Ulceration of the umbilicus sometimes occurs after the cord is separated. If so, dust it with equal parts of Slippery Elm Powder and Fuller's Earth, cover with a few layers of sterilized gauze, and keep in place with an abdominal binder. Sometimes granular tissue or fungus forms after separation of the cord, resembling a red bead; a discharge usually oozes, and it bleeds easily. Dust the granular tissue with a little Blood Root Powder and over this place Slippery Elm Powder, and cover with sterilized gauze.

**UMBILICAL HERNIA.**-This varies in size from a simple convexity of the naval to a tumour large enough to become strangulated. A mechanical application is usually all that is required, the main care being to prevent the formation of a rupture by using an abdominal band during the first four months. I always make a pad with a large wooden button or a slice of a large cork, covered well with cotton. Place this securely over the navel, cover with a pad and bandage. This should be worn continually until the hernia is cured.

**ICTERUS. INFANTILE JAUNDICE.**-This is a common affection of the newly-born. There are two varieties, mild and severe. The mild is due to bile forming in the liver and then being carried into the circulation, the re-absorption being either due to congestion or to edema of the hepatic tissue. The intense congestion of the skin observed during the first few hours of life often produces a yellowish colour that cannot be considered jaundice. The yellow tint is at first seen only on deep pressure, but as the erythema fades the colour increases. The conjunctivae are not coloured, and the urine appears normal. Icterus is usually first noticed on the second day, and may continue a few days or a week. All the treatment needed for this is a laxative for the bowels.

The second form is fortunately rare, and may be produced by several different conditions such as defects in the bile ducts, gall bladder, and liver. The yellowish discoloration of the skin may vary from day to day, at times being much more intense than at others.

The conjunctivae are yellow. The fecal discharges lose colour and have an offensive odour, while the urine stains the napkin yellowish or greenish brown. The spleen, as well as the liver, is usually enlarged, which accounts for the increase in the size of abdomen. A very good laxative is made by steeping a few Sen pods in a little cold water over night, add a little simple syrup in morning, giving 1 teaspoonful every hour for three or four doses.

**CONJUNCTIVITIS.**-The eyes of a newly born infant are very sensitive, and frequently the seat of inflammation. A mild inflammation is often seen, unattended by swelling, the lids and the inner surface being reddened, and covered with a slight viscous secretion, due to some infection, or soapy water getting into the eyes. The eyes must be kept cleansed by bathing them frequently in an infusion of Purple Loose-strife herb. A little Vaseline may be applied to the lids at night to prevent retention of the secretion by adhesions to their edges.

**MASTITIS** (inflammation of the mammary glands). The breasts of the new-born infant often secrete a milk-like substance which appears between the fourth and tenth days after birth. During this time there may be a swelling of the glands, which generally abates with the subsidence of the secretion. In some cases the glands may remain engorged and tender, and suppuration ensues. Massage with camphorated oil and apply 1 application to the breasts, covering with a breast binder. With care, this condition will pass away in a few days. It is by no means easy for a mother, to tell exactly when or how an infant begins to be ill, and a close observation of symptoms and their proper interpretation becomes highly important. Slight causes often produce very marked and sudden effects at this time of life. This is explained by the active growth of infants, and especially by the rapid development and irritability of the nervous system. In the absence of speech, the infant shows discomfort or suffering principally by cries and restlessness.

If watched closely, it may by certain signs indicate to some extent the seat of the trouble. In headache, the hand will be frequently raised and held beside the head; in earache, the hand will be held to the ear, and often pull upon that organ, or the child will keep rolling its head from side to side, or upon pressing in front and behind the ear, the baby will wince or cry. In painful dentition, the fingers will be constantly inserted in the mouth, as if to pull out the cause of distress. Irritation of the stomach and bowels may be accompanied by a continual rubbing of the nose. During an attack of colic, the legs are drawn up over the abdomen, which feels hard; there is likewise a withering motion of the body, the hand is tightly shut with the thumb thrust deeply into the palms, and the toes strongly bent, and there is much nervous irritation, which may end in convulsions. A mother will soon learn where the trouble lies by the kind and style of cry. It is laboured, as if the child were half-suffocated, or as if a door were shut between the child and the hearer, in pneumonia and capillary bronchitis; it is hoarse in croup; brassy and metallic, with crowing inspirations, in cerebral diseases; in marasmus and tubercular peritonitis it is moaning and wailing. Continual and obstinate crying is usually due to earache or hunger. A louder, shriller cry, sometimes with coughing when the child is moved, is pleuritic. A cry with wriggling and writhing and preceding defecation denotes intestinal trouble. Moaning is especially characteristic of an alimentary canal trouble.

**CHANGES OF THE FEATURES.**-When illness is present it is quickly shown in the countenance of the infant, which, during health, is in a condition of easy repose. In general, it can be stated that the upper part of the face is involved in diseases of the head, the middle part of the face in affections of the chest, and the lower part in disturbance involving the abdominal organs. Thus, in disease of the brain, the forehead and eyebrows will be sharply contracted, and the eyes sensitive to light, with various changes in the pupils. Puffiness and swelling about the eyelids point to dropsy, which is usually caused by diseases of the kidneys, following scarlet fever or other infectious processes, but occasionally by severe anaemia.

In pneumonia and pleurisy the nostrils are sharply defined; they dilate and contract with the movements of respiration, which will appear more or less laboured. The mouth is the feature most affected in abdominal disease, shown by a drawing up of the upper lip, and other movements indicating pain.

**DISCHARGES.**-These are very important, and a careful examination of all the openings upon the surface of the body must be made to detect any abnormal discharges, including the eyes, ears, nose, mouth, urinary, and rectal regions. The upright position of the stomach during infancy renders vomiting a frequent and easy symptom when this organ is distended or if there be a regurgitation of some curdled milk after each feed. If an infant shows no distress from this act when in good health, the stomach simply rejecting any excess of food which it cannot readily hold. But sudden and profuse vomiting, without any error in diet, may indicate the approach of severe illness, such as scarlet fever, diphtheria, or some brain disease. Or vomiting may be simply a sign of local disturbance in the stomach, as when mucus is ejected in cases of gastric irritation. Where tough curds are vomited, with the milk very sour, there is evidence of fermentation of the milk and an over-acid condition of the stomach. If this persists, the mouth will become red and sore from continued irritation. Much will be learned by investigating the number and character of the discharges from the bowels, and by observing the urine. During the first two months there are usually three or four stools in twenty-four hours, and during the first two years, two stools a day on an average. The stools are homogeneous, of a soft, semi-solid consistency, and of yellowish colour. In cases of diarrhoea or inflammation they may be green or contain hard, lumpy curds, or have an admixture of mucus or blood, or be of a very watery consistency.

In a new-born baby the urine sometimes causes worry to the nurse. The baby nearly always passes urine when born, due to pressure on the parts. When the baby does not pass water in a reasonable time, great pain and screaming soon take place, due to stoppage of the bladder.



If twelve hours pass without evacuation from the bladder and bowels, place the baby in warm water for 10 minutes, and apply a flannel dipped in warm water over the bladder or lower organs. In some cases where the urine is highly acid it may be expelled when a few drops collect in the bladder, and, as this amount quickly dries in the diaper, there is no evidence from wetting that urine has been passed. A dark, smoke-coloured urine, loaded with uric acid and urates, may leave a red deposit upon the napkin simulating blood. Make a tea from water melon or marrow seeds and give the child the warm tea to drink every half-hour, in teaspoonful doses. This generally relieves the condition.

**THRUSH, OR NURSING SORE MOUTH.**-This is an inflammation and ulceration of the mucous membrane of the mouth, occurring within the first year of life, due to improperly prepared food, and general lack of cleanliness. The babe refuses to take its nourishment, and is very irritable. The mouth is tender and hot. First there is marked drooling and then redness of the surface of the tongue and all around the gums. The tongue may be coated. Soon whitish spots appear arising above the surface of the mucous membrane which do not rub off easily, and leave a bleeding surface. They appear first on the tongue, spreading to the cheeks, and may spread to the lips, palate, tonsils, and pharynx, and at times to the esophagus and stomach. Each spot has the appearance of a little lump of coagulated milk. These cases usually have diarrhoea, and acrid, irritating stools, followed by pain, emaciation, and often death. The trouble can be prevented through cleanliness of nipples, bottles, and mouth, and moderating the food. Wash the mouth out after each feed with Sage Tea, applying it with a soft rug, or make a decoction of Hydrastis (or Golden Seal) Powder and wash the mouth; this is found to be very good.

**FOLLICULAR STOMATITIS, or SORE MOUTH,** is an inflammation with the formation of small vesicles, the latter forming superficial. These ulcers are at first discrete, but may coalesce into larger ones, always, however, remaining superficial.

At first isolated yellowish-white spots on the lips, mouth or palate are noticed, surrounded by a reddened mucous membrane due to uncleanliness, dentition, or gastrointestinal disorders. With proper treatment and care the period of this condition can be considerably shortened. But if improperly managed it may lead to ulcerative stomatitis, which is more serious. Cleanliness is very important. Wash the mouth every two or three hours with an infusion of Golden Seal Powder, made by pouring one pint of boiling water on one teaspoonful of the powder, or make a weak solution of the Compound Tincture of Myrrh.

**ULCERATIVE STOMATITIS, OR SORE MOUTH.**-This may be a continuation of the follicular sore mouth and it may be due to decayed teeth, improper food, bad hygiene, taking of mercury, exhausting diseases, scurvy, or infectious diseases. It is generally found in the second year of life. Attention may be attracted to the child because food is refused and pain is caused by attempts at eating. The breath is foul and the tongue is coated. Children with this condition are irritable and sleep badly. They become weak and depressed from lack of food. Examination of the mouth shows the gums at first to be swollen and red. The lower jaw is commonly involved at some point situated on the edge of the gums. A purulent exudate is then formed, leading to necrosis and ulceration on the gum margin which spreads all over the mouth. In aggravated cases the teeth are exposed and loose in their sockets. The submaxillary lymphatic glands are badly swollen and painful. The tongue is swollen, thickly coated, and shows the indentation of the teeth on the edges. Drooling is pronounced. The odour is distinctly fetid. Cleanliness is the first essential, keeping the mouth scrupulously clean by frequent washing with Golden Seal or Myrrh decoction. Remove the cause, whatever it may be, and give light, nourishing diet. Slippery Elm food is excellent. Also regulate the bowels.

**ELONGATED UVULA.**-Although rarely observed, this condition has led to much improper medication for persistent cough.

The elongated uvula irritates the pharynx and causes a cough, which is especially marked when the prone position is assumed, or when the child is over-tired. If the chest symptoms are negative, this condition should be thought of. The elongation should be snipped off, or an astringent used such as Bayberry or Golden seal powder,

TONGUE-TIE consists of an abnormally short fraenum. It may interfere with suckling, and later may possibly affect the speech, but it is not nearly so important as is commonly supposed. Snip the fraenum near its attachment to the tongue with a pair of scissors, or with a dull instrument, or, better, with a sharp point on the finger nail.

PHARYNGITIS, OR INFLAMMATION OF THE PHARYNX. -The pharynx and tonsils are inflamed and red. It may be, and frequently is, a primary disease; or it may be part of one of the infectious diseases, such as scarlet fever, measles, diphtheria, or influenza. There is pain in swallowing, and dryness in the throat later an increase in the secretion, and an irritating cough.

On examination, the soft palate, uvula, tonsils, and pharynx are seen to be red and inflamed. There is a rise of temperature. Headache and vomiting may be present. A stimulating emetic should be given, by giving the child warm Composition and broken doses of Lobelia. Wash the tonsils three or four times daily with tincture of Myrrh and water (equal parts). For the bowels give one teaspoonful of Neutralising Cordial every two hours.

NASAL CATARRH.-Infants often sneeze normally during the first few days of life, the mechanical irritation of dust in the air being the cause. Children in many families have a predisposition to catarrh. It is most likely contagious.

The handkerchief can, no doubt, carry the contagion from one to another. There are two primary causes of Catarrh: (1) Children that are kept, indoors and muffled up so that their bodies are overheated and so sensitive to exposure, will have nasal catarrh; (2) children who, in order to be "hardened," are over-exposed while they are still sensitive.

There is a hyperaemia in the nasal passage, causing obstruction. This will compel the infant to breathe through the mouth. It will also interfere with the feeding. The nose being stuffed, the infant must breathe through the mouth. The secretions at first are thin and mucous; later on they assume a muco-purulent character. The latter discharge is thick and sticky, and while drying obstructs nostrils. Put the child to bed. If there is fever, keep the child warm. The body should be warmly clad. Make an infusion of White Pine Bark, I-oz. to I pint. Give in teaspoonful drops, sweetened; increase dose according to age.

TONSILITIS, OR INFLAMMATION OF THE TONSILS. The whole mucous membrane of the pharynx and tonsil is inflamed. The tonsils may be somewhat enlarged and are covered with very fine pinhead points of a whitish exudation. There is fever and restlessness with difficult swallowing. Give liquid diet, and keep the child warm. Where the tonsils are enlarged, poultice with Linseed Meal poultice sprinkled with a little Lobelin, Capsicum, or Ginger. Make a syrup (4-oz.) with Xanthoxylum 2 drams, and give in teaspoonful doses every 3 hours.

MILK CRUST is a severe itching disease of children due to nervous irritation of teething, and is very annoying and often gives a good deal of trouble. First small pimples break out about the ear and on the forehead and head, then vesicles form filled with water, which break and form into a dirty-looking yellowish and sometimes greenish scab, which gives out a disagreeable odour. It spreads sometimes over the scalp and face. The eruption causes great irritation and itching; the child is constantly scratching himself, and crying, and is prevented from sleeping. Observe strict cleanliness. As a dusting powder, use Slippery Elm Powder as an ointment, Chickweed. Regulate the bowels.

DIARRHOEA means too frequent stools. This increased peristalsis is usually due to some specific cause. Infants fed on liquid diet are more prone to loose evacuations than older children fed on a solid or semi-solid diet. The active causes are excessive feeding and the use of foods unsuitable to the age of the child. We frequently meet with people who think it wise to give their children, regardless of age, a bit of anything from the table.

This is very wrong. Diarrhoea is often Nature's method of eliminating poison, so frequently seen when a diarrhoea commences in the course of an acute infectious disease. The toxic or poisonous product can best be eliminated by the emunctories, and the intestines are one of the most valuable agents for eliminating poison from the body. First find out the cause of diarrhoea and remove it if possible. Regulate the diet. Give a baby whey and rice water, or the white of an egg, beaten up in water, or arrowroot, or flour boiled in milk. To older children give Slippery Elm Food. Give one teaspoonful of Neutralising Cordial every two hours until the bowels are cleansed, or give Blackberry, or Raspberry Leaves made as a tea.

**CHOLERA INFANTUM, OR SUMMER COMPLAINT.**-This is an irritative diarrhoea. It is a hot weather disease caused by heat, bad air, or improper food. In bottle-fed children, especially among the poorer classes, acute milk poisoning is frequently seen during the Summer months. This is due to the chemical or toxic products developed in the milk. Summer diseases will appear as readily in breast-fed children who are improperly managed as in bottle-fed children. A child apparently quite well only ill from digestive disturbance suddenly begins to vomit, and has a rise of temperature. A profuse diarrhoea follows, possessing the characteristics of decomposition. The vomiting is frequent, and follows every attempt to introduce food or drink into the stomach. In this case the food should be stopped for a time. At first curdled milk is ejected, and later mucus and serum and bile. The stools are frequent fifteen to twenty in a day, at first faecal, of yellow, brown, or green colour, and later losing all color, and consisting simply of large quantities of serous fluid. These are typical stools of the disease. They are acid at the beginning, but when they become serous are alkaline. Thirst is intense, the child eagerly taking any fluid given it. The abdomen is usually extended, with a great deal of flatulence, and is very tender to touch. The tongue is coated early, but soon becomes dry and red. The pulse is weak and rapid, the respirations shallow and fast. The child loses flesh and colour very rapidly, the eyes sink in their sockets, a marked pallor develops in the skin, the flesh seems to disappear very rapidly, and the skin becomes cold and clammy.

The nervous symptoms are very marked, the child crying or moaning, and throwing itself about in a very restless way. Delirium and convulsions may follow. Cases of cholera either or show marked changes for the better in two or three days. On recovery, the vomiting usually stops first, then the stool becomes less frequent, recovery being slow. These are sad and pitiful cases to look at, but with treatment and care there is no reason why they should not recover. First, stop all foods. If the infant is breast-fed discontinue the breast for twenty-four hours. Give rice water to drink in very small doses. When there is vomiting, only give enough to wet the mouth. Give the Neutralising Cordial in doses according to age. It is best in these cases to give very small doses on account of the vomiting. Apply warm fomentations over the stomach and bowels of oatmeal or of flax-seed meal. Keep the child warm. Chamomile Tea is very good to drink, likewise tea made of Blackberry or Raspberry Leaves, or the following may be given:

Wild Cherry Bark Powder  
Prickly Ash Berries Powder  
Culvers Root Powder.  
Asclepias Powder  
Rhubarb Powder

Equal parts. Take one teaspoonful to a mug of boiling water, sweeten. Drink a small wineglassful warm after each operation of the bowels. I have found the following good in such cases :

Gerenium Maculatum  
Sage  
Elder Flowers  
White Oak Bark

Equal parts. Make like tea. Use according to the age of child and condition. Give an injection of the bowels of an infusion of Re Sage.

CONSTIPATION should be regarded as a symptom and not a disease, and accordingly the underlying cause should be sought for and corrected.

Artificially fed infants are the most frequent sufferers because of badly-balanced food mixtures, either too large or too small an amount of one ingredient of the milk, or the boiling of milk itself, being the cause. Breast-fed infants are constipated from deficiency in the fat or total quantity of solids present in the mother's milk. In older children a badly-arranged dietary, especially a deficiency in the carbohydrates and fruit juices, will cause this symptom. Next to diet, the lack of training of the child is an important cause in producing constipation, and constitutional diseases. Other causes are deficiency of the intestinal and biliary secretions. Again, the condition may be caused by congenital anatomical abnormalities, by new growths, or by the disproportionate length of the sigmoid flexure. The babe should have two or three movements daily. Some will be quite normal with one evacuation daily, while others will have three or four movements daily and enjoy good health. There are decided peculiarities noted with reference to bowel movement in children. If it is a breast-fed baby, the mother must keep herself well or wean the baby. Give the baby lots of water to drink. Oatmeal water is good to give. With older children, regulate their diet teaching them to eat brown bread made from wheat-meal, with a vegetable diet. If a laxative is needed, give Syrup of Rhubarb one-half to ounce teaspoonful once or twice daily.

**CONVULSIONS, OR SPASMS.** This is a disease which is probably more dreaded by mothers and nurses than any other, on account of the appearance and suddenness of the attack of the spasms. Convulsions are a violent and involuntary contraction of the muscles of the whole or part of the body, and are due to some affection of the spinal nervous system and disturbance in the motor area of the brain due to various causes. The susceptible age is the first two years of life. Children of a susceptible, irritable, and nervous temperament are most liable. The most common causes are difficult teething, worms, irritation of the bowels due to indigestible foods, eruptive fevers, scalds, burns, foreign bodies in the nose or ears, improper feeding. Spasm has been caused by a mother breast-feeding the child when overheated, also after some mental emotion, shock or anger, or rachitis.

The attack begins without warning. It may be preceded by slight twitching of the face and rolling of the eyes. Unconsciousness succeeds. The head is drawn backward, and the eyes are fixed and staring or rolled up under the eyelids. Respiration is usually arrested, the muscles of the face become affected, and finally the whole body becomes rigid. Irregular and violent movements of different parts of the body begin. The teeth are firmly set. The colour of the face is dusky. There may be involuntary passage of urine and feces. When the spasmodic action ceases the muscles gradually relax, and consciousness returns. A fit may last a few moments or may continue for hours. A child will sometimes have several fits during the day, but there will always be a longer or shorter interval between each spasm. They are very exhausting to the vital forces, and whatever is to be done must be done quickly.

**Treatment.**—First overcome the attack of symptoms. Get the child into a hot mustard bath as soon as possible. As the water cools keep adding more hot water until relaxation occurs. Put a cold ice cloth to the head. Then wrap the little one in a warm blanket. After the bath, give a copious rectum flushing of warm water, which relieves the lower bowel of all effete material and assists in recovery. If caused by an overloaded stomach, give an emetic of tepid water, tickle the throat with a feather, and give small continued doses of Syrup of Lobelia until vomiting occurs, then follow by giving Re-animating Drops, doses 10 to 15 drops, in a sweetened water, every half-hour until relieved. Give nourishing food and hygienic treatment.

**MARASMUS, OR INFANTILE ATROPHY.** Marasmus is a very common functional disorder in infancy, characterised by extreme emaciation resulting from inability to assimilate food. It is really due to a deficient metabolism, and results in a gradual decline. It is usually seen in the first year of life. The greatest number of cases appear in institutions and in dispensary practice. Poor food given in great quantities, coupled with unsanitary surroundings, have a distinct bearing on the development of marasmus. If the digestive secretions have not been sufficiently developed by proper food, or if they have been over-produced for some time in efforts to digest abnormal food constituents, then this disorder may insidiously appear with symptoms of acid

Improper development, premature birth, congenital defects, and inherited diseases are all causes. The train of symptoms begins insidiously. There is loss of weight and emaciation, in spite of the fact that the food has been the same or even increased in amount. The muscles become soft and flabby, the skin loose and wrinkled. The facial appearance changes, due to the loss of fat, resulting in a wrinkled forehead and sunken cheeks. The abdomen and thighs show the emaciation quite early, The skin feels harsh and dry and has lost its elasticity. The abdomen grows prominent and distended. Finally, nothing seems left but the skeleton covered by skin, Temperature is usually sub-normal, pulse rapid and feeble, and respirations inefficient. The tongue is coated, and the mouth is frequently the seat of thrush. The appetite is usually voracious. The infant will take an enormous quantity of food and still cry as if unsatisfied, the call of the starved tissues for nutriment being strong and constant. The taking of foods does not seem to satisfy this hunger; naturally so all the tissues do not receive it. The child lies quietly dozing a good deal of the time, constantly sucking the fingers and hands. The disease advances steadily to a fatal issue. Treatment.-Remove the cause, pure air and hygienic surroundings are essential. The mildest and most non-irritating food must be selected. We must begin with a dilute milk and gradually increase the ingredients with the child's ability to digest them. In some children where milk foods are badly assimilated and gastric symptoms follow, it may be wise to discontinue milk for several weeks, so as to give the stomach absolute rest, and give foods that are more easily assimilated until such time. when milk may again be tolerated. Whey and egg albumen, and light Slippery Elm Food may be given to suit the condition, alternately or separately, Tea made from Catnip or Raspberry Leaves or Peppermint will be found very valuable given two or three days without any other food. Keep the child warm, giving daily bath, and follow with massage of olive oil.

RICKETS is insufficient bony development of the system, due to prolonged feeding on a diet which does not contain all the proximate principles of milk in comparatively proper quantities or because in quantity and character it overtaxes the digestive functions; prolonged nursing at the breast, or condensed milks

Symptoms of rickets are slow, with very gradual onset and progression. The child becomes very fretful, and there is disturbed sleep, and excessive perspiration about the head. The muscles are generally soft and flabby; the abdomen is distended tympanitic, and evidences of imperfect digestion are found in fetid stools and in the constipation alternating with an occasional diarrhoea. In spite of this, the appetite is generally good, more food being taken than is digested. This complaint is also characterised by the beading of the ribs, large bones, big head, crooked spine and limbs, short stature.

To treat these cases pay strict attention to hygiene, ensure plenty of sunshine and outdoor life, and give cool bath daily. The diet should be made to conform as nearly as possible to the normal one for a child of the same age. Abundance of fats and proteins should be taken. Cream, beef juice, starchy foods, and sugars must be avoided, and lime-water used with strained, boiled oatmeal or wheat meal is very good. Children of eighteen months or over may be given broths, bean soup, fish, and whole-wheat bread. To check the diarrhoea give Neutralising Cordial and Wild Cherry Syrup (equal parts), one teaspoonful every two hours, in a dose according to the age of the child. Keep the child warm.

PROLAPSUS OF THE BOWEL is due to either prolonged constipation or diarrhoea, or to straining or bearing down on the part of the child in order to evacuate the bowels, causing irritation and inflammation. The bowel, losing its elasticity, is forced through the opening. It becomes swollen and chafed and painful. To remedy this lay the child across the lap. With clean hands gently sponge and anoint parts with Witch Hazel Salve, and gently push the bowel into position. Keep the child lying quiet. Regulate the diet and give laxatives.

## **GOLDEN RULES .**

### **In Infancy and Childhood.**

Practice the quiet manner and the gentle voice.

Win the confidence of the children; do not frighten them.

Always tell the child the truth; it imparts confidence.

The infant is peculiarly susceptible to diseases of the digestive tract; the child, because it comes in close contact with others, more easily contracts contagious diseases.

Examine the throat in every case of an acute fever.

The loss of weight in breast-fed infants, not due to digestive disturbance, may be caused by pregnancy of the mother.

Remember that Diarrhoea in infants may be a symptom of any acute disease.

The gaseous distension of the abdomen is a serious complication of diseases of pleura and lungs. Usually the result of over-feeding.

An acute paroxysmal abdominal pain from flatulent colic is common in infancy. It occurs especially in breast-fed infants, and may be apparently very severe. Prostration however, rarely follows the attack.

An infant should hold its head up in three or four months, be able to sit up unsupported at six or seven months, and should be able to stand, with slight support, at nine or ten months.

Remember that the skin and mucous membrane of the newly-born infant are very susceptible to infection and irritants, so do not wash or rub the skin too much, and be careful that bathing does not convey an infection from one part of the skin to another.

Circumcision is to be performed after three weeks. Do not perform this operation if jaundice is present. Light, plenty of fresh air, and plenty of water to drink are very important for babies. Stuffy rooms and too much clothing predispose to "colds."

Do not allow the sucking of a "pacifier" or of the thumb. It is a bad habit, and often causes deformity of the teeth or jaws.

If the child's stomach gets out of order, stop the milk and give water only, or albumen water.

## **APPENDIX.**

Infants' Food.-It is relished by the infant, readily appropriate does not distress the digestion, may be given warm or cold, 11 seems best, and the child thrives on it. from the first. Whole wheat bread contains to a very large extent. the elements for cell growth that. are required by the infant. It is prepared by steeping two or three slices in hot water for half-an hour. The bread should be properly prepared and selected. Biscuits or crackers are not be used. After being properly boiled, this should be strained through a thin cotton cloth, and the mass thoroughly compressed until the largest possible amount of nutrition of the bread is in liquid. To perhaps half a pint of this-ten ounces-a teaspoonful, even two teaspoonfuls, of the sugar of milk may be added. For young infants the amount. should be carefully adjusted, and it should be fed warm from an ordinary feeding bottle. When properly prepared, it has the appearance of mother's milk. Children fed on this food are known to be strong, vigorous, and healthy.

Slippery Elm Food for Infants and Invalids. Cut an ounce of Slippery Elm Bark (*Ulmus Fulva*) obliquely into small pieces about the thickness of a match. Pour on It pints of boiling water let it stand an hour or more in a warm place, and the liquor will become mucilaginous. Add half a cup of milk to the same quantity of the liquor. A little stick Cinnamon may be added when infusing in cases of vomiting or diarrhoea. For a pleasant drink, leave out the milk and add a line of lemon.

Caraway Water .-Place 2 tablespoonfuls of crushed caraway seed in a small muslin bag, and put this in a pint of water. Boil down to half a pint. Put 2 teaspoonfuls in to the baby's bottle. It will remove colic, and is quite harmless.

Albumen Water or Egg Water for Young Infants: -Beat the white of an egg into one pint of ice-cold water. Do not shake. Flavour to taste.

Coddled Egg.-Place a fresh egg in the shell in boiling water and immediately remove from the fire. Let the egg remain in the water, which is gradually cooling, for 8 minutes, when the white should be of the consistency of jelly. For a delicate digestion, only the white, which can easily be separated from the yolk

Linseed (Flaxseed) Tea.-Take 1 oz. of whole linseed, juice of 2 lemons, 2 small sticks of Licorice Root, crushed, and 1 heaped teaspoonful of sugar. Pour on these, 2 pints of boiling water and stand in a hot place for 3 or 4 hours. Strain.

Chicken Broth.-Chop fine a small chicken and boil in 1 quart of water for 1 hour, adding a blade of mace and parsley, also some rice and a crust of bread. Skim from time to time, and strain.

Reef Juice.-Select round steak free from fat. Chop into pieces less than an inch square, and put in a double boiler (no water with the meat). Place on a slow fire where the water will simmer (not boil) for 3 hours. Press out the juice, and season.

Mutton Juice.-Cooked as above, is also very nutritious.

Linseed (Flaxseed) Lemonade.-Pour 1 quart of boiling- water over 4 tablespoonfuls of whole Linseed, and steep 3 hours. Strain; sweeten to taste, and add the juice of 2 lemons. If too thick, add a little more water. This is excellent for fevers and colds.

### **BATHS AND COMPRESSES.**

Mustard Bath.-Add 2 tablespoonfuls of mustard to 1 gallon of water. For very small infants it, is better to put the mustard in a piece of thin muslin and let it remain in the bath, gently squeezing it from time to time.

Salt Bath.-Dissolve 4 heaping tablespoonfuls of common sea salt to each gallon of water. A plunge in such a bath, followed by a brisk rubbing, has a decidedly tonic effect.

Bran Bath.-Put 1-lb. or more of bran in a muslin bag, and boil in water for 15 minutes. Squeeze occasionally and add this water to a bath until it has a milky appearance.

Warm Compress.-Fold a piece of cloth into several thicknesses, dipping it in tepid water, and placing it on the affected part. Cover with oil silk. Hold the compress in place by a bandage. This is good for a Sore Throat and Inflammation.

Hot Fomentations.-Are made as above, only cloth must be put in very hot water and wrung out.

Cold Compress.-This is made in the same way, only cloth must be put in cold water and wrung out, changing it often, not allowing it to become warm, and not covering it with oiled silk. This is good for Sprains and Inflammations.

Infants' Cordial, for expelling wind or for use in cases of Gripes.-Take 1-oz. of concentrated Dill Water, 4-oz of distilled Aniseed Water, 3-oz. distilled Best Jamaica Ginger Water. Mix and give from half to one teaspoonful when required, to infants from 1 or 2 days old, increasing dose according to age up to a tablespoonful for adults.