2. Little or no soap. If soap must be used to cleanse the part (urine excepted), choose a good soap that is old and hard.
3. Vinegar, 1 part to from 4 to 8 parts hot water:
   It is a refrigerant and an astringent, both beneficial actions to an unhealthy skin, besides it neutralizes the ammonia found in decomposed urine, therefore should always be used when patients have incontinence.
4. Dry the parts thoroughly by surface friction movements.
5. Never use alcohol in any strength, unless it is ordered for a specific purpose. Alcohol dries and shrivels animal tissue.
6. Dry skin: Lubricate with mutton tallow rubbed in with the balls of the fingers.
7. Powder well: Cornstarch is excellent for adults because it absorbs moisture and leaves the skin feeling cool.

ON THE DISCOVERY OF THE COURSE OF MALARIA.

The dramatic finale of the long quest is told in the words of Col. Sir Ronald Ross, the discoverer, "The dissection was excellent and I went carefully through the tissues now so familiar to me, searching every micron with the same passion and care as one would search some vast ruined palace for a little hidden treasure. Nothing. No, these new mosquitoes also were going to be a failure; there was nothing wrong with the theory. But the stomach tissue still remained to be examined—lying there, empty and flaccid, before me on the glass slide, a great white expanse of cells like a large courtyard of flagstones, each one of which must be scrutinized—nail an hour labour at least. I was tired, and what was the use. I must have examined the stomachs of a thousand mosquitoes by this time. But the Angel of Fate fortunately laid his hand on my heart; and I saw a clear and almost perfectly circular outline before me of about twelve microns in diameter. The outline was much too sharp, the cell too small to be an ordinary stomach cell of a mosquito, I looked a little further. Here was another, and another exactly similar cell. The afternoon was hot and overcast; and I remember opening the diaphragm of the substage condenser of the microscope to admit more light, and then changing the focus. In each of these cells there was a cluster of small granules black as jet. It was the malarial pigment. The next day the cells had grown larger; they were the malarial parasites and it was not long before their life cycle from the stomach to the proboscis of the mosquito was followed.—From the "War against Malaria," a pamphlet printed in the interests of the Ross Institute Fund, London, 1923.

[From The Nursing Mirror and Midwives' Journal.]

FOOD VALUE MENUS.

So interested has the American public become in food values that many of the restaurants are printing on their menus the caloric value of the different items. At the first glance at the classified values there begins an inward battle between the artistic eye and the limitations of one's purse. If you want to lay out your money economically, you buy pork and beans, a ham sandwich,
or a beef stew; if you fancy the decorative value of a tomato and lettuce salad, you pay for calories in an expensive way, but have something pretty to look at. Cereals, peas, beans, potatoes, cheese, butter and bacon are moderately cheap for calories, while all fish, with the exception of herrings and eggs, together with most fresh fruits and vegetables, are astonishingly dear when viewed as means of obtaining calories. Foods vary enormously in their caloric value, as for instance 125 per pound when purchased in the form of cabbage to 3,000 or more in butter.

"THE BLIND TO SEE."

A wonderful report comes from the Moorfield Hospital for Diseases of the Eye. By the means of mercury vapour lamps installed in a clinic for blind patients, where they are treated with ultra-violet rays, sight has been restored to many diseased eyes. This new method of treatment is indeed a direct and powerful attack upon blindness, and its success is like a ray of sunshine to the blind patients who hear of it. Men and women are waiting their turn hopefully, but it remains for them to know what good or ill fortune awaits them until sufficient funds can be provided to obtain more apparatus. The waiting period must be very trying, and we sincerely hope that the money will be speedily forthcoming.

HEALTH VISITORS' LEAGUE.

DEAR FELLOW MEMBERS,

Following up my letter of last month this article by Mrs. Underhill will be interesting; I saw it in The Nursing Mirror and reproduce it for you.

"One day," writes Mrs. Underhill, "I was at the Zenana Hospital of Renawari, near the Fort and city of Srinagar, and there I saw a little thin girl, pathetic, large-eyed, solemn. She was aged twelve, and in her arms she held her new-born baby—both she and the child only alive through the skill of the lady doctor who had performed the operation known as caesarean section to save the double life.

There was 'an old woman' there, who was a grandmother. She was aged twenty-four. And it is only in quite recent years that the Hindu or upper class population have been willing to bring their girls to hospital at all, or that they have allowed this wonderful operation to save the lives of these child-mothers. The number of maternal deaths is tremendous, as the children are kept always in Pardah. They lack light and air, and this produces a disease resulting in softening of the bones known as osteomalacia, and practically every Kashmiri Hindu woman who has had children is affected. The exceptions are the boat-women. The Mahomedan poorer class of people, who, because they are poor, live as Nature's children, sleep in their open corn boats which are their homes, eat raw food, raw vegetables and milk, and work hard with their men. The worst cases of osteomalacia are found in the homes of the wealthy, where Pardah means absolute seclusion; for if the girl is of a high-class family she does not leave the house till she is past child-bearing age, till she