The Pulse

REPRESENTING THE
STUDENTS, ALUMNI AND FACULTY
OF THE
UNIVERSITY OF NEBRASKA COLLEGE OF MEDICINE

Vol. VIII MAY 6, 1914 No. 12

WISE MEMORIAL HOSPITAL
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College of Medicine

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DANCING MANIA

St. Vitus Dance, Chorea, Minor Chorea, and the Chorea of Sydenham, are each terms expressing our conception of a functional nervous disorder peculiar to childhood, but not unknown in adults or even in old age. It is rare prior to the age of four years. The name dancing mania was introduced in the fourteenth and fifteenth centuries when those afflicted with what we now name chorea were ordered to appear before the Strasbourg magistrate in the chapel of St. Vitus, to be cured by the influence of the saints. Varying clinical manifestations have given cause for the use of descriptive adjectives indicating particular types of the disorder. The names above used include all but the exceptionally few cases known as chorea major, chorea gravior or chorea insaniens. These forms represent marked intensification of motor, and usually mental manifestations never present in the ordinary choreic attacks. When fever, delirium, and maniacal symptoms supervene the clinical syndrome is appropriately named chorea insaniens. In some of these severe forms hysterical symptoms so overshadow the choreic syndrome that a diagnosis of hysteria is made. So long as we are ignorant regarding the etiology of both chorea and hysteria it seems an act of better judgment to differentiate in favor of the disorder least protean in its characteristics. There is a form of chorea peculiarly liable to appear in the third or fourth decade of life. It is classed as an hereditary nervous disorder and designated Huntington’s Chorea. In it the mental horizon gradually recedes to obvious dementia. It is chronic from its initiation to the close of the natural life, while the varying forms of Sydenham’s chorea are acute, respond to rational treatment, usually get well in one to three months, and rarely become chronic or precipitate death. Rest in the prone position, non-stimulating foods, warm (100°F) tub baths for thirty minutes once or twice in twenty-four hours, good elimination by all the excretory organs, and isolation from aught to arouse the emotional nature, is often effective treatment. The use of a nerve sedative—not irritating to the digestive organs—combined with arsenic (Fowler’s solution) unless the patient is anemic—when arsenic should be discarded for a good tincture of iron—will usually expedite progress toward recovery. In a personal experience with seven cases of major chorea, two died and five recovered. The first death was a lad of fourteen who had a heart lesion concurrent with a sharp attack of rheumatism followed by major chorea. His death occurred in forty-eight hours after he came to the Methodist hospital. The second was a school girl of nineteen with a negative history of rheumatic, cardiac, or other somatic disease. Six
months previous to developing chorea she showed unusual irritability, perversity and stubbornness. Six weeks previous to entering the M. E. hospital and a few hours subsequent to wading barefoot in a stream of water she became suddenly ill with headache, vomiting, and a moderate pyrexia with delirium. In less than one week these symptoms gave place to chorea that rapidly assumed the insaniens form. She was in the hospital twelve days. The last ten days she could not swallow, was unable to speak, did not respond to any medication by the stomach, rectum, or subcutaneously, and died with a temperature of 106.5 F. Her death was due to exhaustion.

JOSEPH M. AIKIN.

FURTHER GIFTS TO THE ANATOMY DEPARTMENT

Mr. Guildier, who recently presented the anatomy department with several very valuable skulls, has donated seven more skulls to this department. These skulls are from Indian mounds found principally in Sarpy county, Nebraska. One of these is an especially valuable addition to the collection, as it comes from a geological deposit considerably older than the others, and probably represents a connecting link between the Loess skull, a cast of which Mr. Guildier presented to the department some time ago, and the mound builders' skulls. These latter are probably 2,000 or more years old, while the age of the Loess skull is estimated at 10,000 to 20,000 years. Of the other skulls, three are those of the ancient bluff dwellers of the Missouri, and the remaining two are those of more modern Indians.

If Dr. Poynter is wanted, he may usually be found these days in the anatomy laboratory, making careful and precise photographs of the skulls from every possible angle. Before photographing Near-Loess-Man it was necessary to fit him out with a new mandible, his own having been lost somehow in the rush. Such a problem was dead easy for our care-free doctor. Casually scratching around among his mandibles he selects one at random and fastens it on. Behold, it fits beautifully. True, it is several thousand years younger, but that after all is a mere trifle!

MISS WARNER HERE

Miss Myra Warner is in Omaha for a short stay. She is here doing some art work for the department of anatomy, and has already produced some excellent drawings of recently found interesting anomalies in anatomy. At present she is at work reconstructing the features on several of Guildier's skulls. The way that this work is done is very interesting. We had no idea that an artist could be so exact. Before the clay is put on, the depth or thickness of the flesh all over the skull is very carefully staked out with little wire pins, and the clay is then built up to just exactly this thickness. Miss Warner works with a drawing of the facial muscles before her, and duplicates in the clay every one of them which might give expression to the face. When finished, plaster casts will be made of these models, and when the reconstructions are complete the clay will be removed and the skulls will be skulls once more.
Dr. J. J. Hompes, '08, read a paper before the Missouri Valley Medical Society, which met in Lincoln March 26-27.

The April meeting of the eye and ear section of the Douglas County Medical Society was held in Omaha on the 22nd. A symposium on syphilis of the nose and throat was given by the following members of the society: Dr. L. L. Henninger, '02, Council Bluffs; Dr. A. R. Knodle, '04, Omaha; Dr. J. J. Hompes, '08, and Dr. E. C. Hayman, '08, of Lincoln.

Dr. R. R. Reed, '10, of McCook, Neb., was in Omaha recently.

Dr. M. D. Baker, '05, came in from Tilden on business the later part of April.

Chairman John B. Potts, '07, of the arrangements committee of the fifth annual Alumni Week, to be held in October, has already started preliminary plans for the biggest meeting in our history.

The annual catalog of the college of medicine just issued shows twenty-nine of our alumni connected with the faculty.

Dr. Wm. Kerr, '02, of Randolph, Ia., visited Omaha on business the last week in April.

Dr. A. C. Stokes, '99, read a paper on the "Surgical Diseases of the Heart and Lungs" before the Omaha Douglas County Medical Society April 28.

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DISPENSARY NEWS.

Miss Stuff went to Lincoln Tuesday, May 5, to take charge of the examinations of the State Board of Nurse Examiners, of which board she is the secretary. The examinations will be held Wednesday and Thursday of this week at the State House in Lincoln. Miss Stuff has engaged Miss Anna Shestak, a graduate of the Illinois Training School for Nurses, to take her place at Dispensary for the rest of the week.

Dispensary report for April, 1914:

<table>
<thead>
<tr>
<th>Cases sent to the hospital</th>
<th>9</th>
</tr>
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<tbody>
<tr>
<td>Out calls</td>
<td>86</td>
</tr>
<tr>
<td>Cases seen at dispensary</td>
<td>840</td>
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Total number of cases 935

This makes a daily average of thirty-six cases. April shows the same steady increase which the dispensary has shown all this year, the total for the month being greater than that of any previous month. This does not include the cases seen at the Union Pacific Dispensary.

On Thursday, May 7, Dr. Findley will hold a gynecology clinic at the dispensary for the Seniors. This will be the first gynecology clinic held at the Dispensary this year.
HISTORICAL SKETCH OF WISE MEMORIAL HOSPITAL.

About thirty-five Jewish men and women, representing the various congregations and societies in the city of Omaha, met at the Harney street Temple September 24, 1899, to consider the advisability of forming an association whose duty shall be the maintenance of a Jewish hospital.

The meeting was called to order by Rabbi A. Simon of Temple Israel and who, at the election of permanent officers, was elected its president; Mr. E. Fleishman, vice president; Mr. Reichenberg, treasurer; Martin Sugarman, recording secretary; Miss Jennie Levy, financial secretary.

The trustees were Mrs. J. Sonnenberg, Mrs. J. L. Brandeis, Mrs. C. Schlank, Mrs. Albert Heller, Mr. Kattleman. The association was first called the Omaha Jewish Hospital Association, but the name was changed to Wise Memorial Hospital, named after Rabbi Isaac M. Wise, the founder and president of the Hebrew Union College of Cincinnati and for half a century the foremost Rabbi in the United States. It also was incorporated in 1901.

In pace with the great strides of a great city, this hospital grew from a small frame building at 3208 Sherman avenue to another building a little larger, as they found their first quarters too small, and so rented a large brick building at 2225 Sherman avenue, then known as the J. J. Brown residence. Here they took care of 3,025 patients, and here they again found it too small, and so, with the efforts of Mrs. J. L. Brandeis, Mrs. J. Sonnenberg, Mrs. C. Schlank and others, found how much good could be done to the sick and afflicted with still larger quarters, they decided to start a fund with which eventually to build a hospital of their own, and so, with the assistance of the board, gave a fair, which cleared $5,000.

It was the aim to build a first-class, up-to-date hospital, to care for the suffering, and not to discriminate against a patient because of difference in religious belief; but to make this hospital a lasting benefit to suffering humanity, without reference to creed or condition.

Unfortunately, Mrs. J. L. Brandeis, who was its president for five years, was called away from our midst before the hospital was completed, and so the board elected Mr. A. D. Brandeis to succeed his mother as president. He kept the office from 1905 to 1908, when Mrs. J. Sonnenberg was elected president, and has held this office ever since, and to her efforts and untiring devotion, with the assistance of others, has placed the hospital where it now stands amongst the first rank of the hospitals in our city, and four months ago the Hospital Training School met the requirements of the New York State Board of Registration and is recognized in the New York register.

Six years ago the hospital first became affiliated with the University of Nebraska Medical College. Clinics under Dr. Stokes and Dr. Goetz are conducted at the hospital. Other staff men associated with the school are Dr. James, Dr. Davis, Dr. Pollard, Dr. Lemere, Dr. Bannister, Dr. Summers and Dr. Hull.

The Nurses’ Training School the last year has become affiliated with the University Dispensary.
TENNIS.

The Nebraska College of Medicine has just completed a most interesting inter-class tennis tournament. The three courts situated just west of the main building have been the scene of some close and hotly waged battles which have been witnessed by many of the students and an occasional faculty member. The singles have been completed and the doubles will be played during the coming week. The different class winners were declared after each class had held its own elimination tournament. The four winners then were matched for the school championship. The Juniors were returned the winners after defeating the Seniors and lastly, but not least, the Freshmen, who in turn had downed the Sophomore champ. Obie Meyer of the Juniors was returned the school champion after a gruelling battle with Wildhaber of the Freshmen, which lasted the entire limit of five sets.

The tournament has been a means of interesting many of the students in the game and the enthusiasm manifested during the past two weeks speaks well for the school in this line of student activity. The men who were green at the game at the first of the season have made marked improvement and the coming tournament will no doubt be doped wrong in a number of the matches.

The results of the semi-finals and finals were as follows:

Wildhaber vs. Galbreath. 6-2:6-2:7-5
Young vs. Meyer. 3-6:6-3:3-6:6-2
Wildhaber vs. Meyer. 7-5:3-6:8-6:10:6-3

The general University tournament starts this week and the drawings were made Monday. There are 38 entries among the students and eight among the faculty members. The winner of this tournament will be awarded the silver loving cup donated by Dr. A. C. Stokes, which will be known as the "Stokes Trophy." The doubles drawings have not been made and the singles will be nearly completed before the same are made.

The officers of the association, along with the manager and Dr. Cutter, have been endeavoring to schedule contests with the State University, Bellevue and Omaha University. At present we are not able to announce any definite date for any of the matches, but they will come in the near future.

Tennis Cuts.

Davis—The Lofard king.
Aten—Speed and head, but not the arm.
Johnson, O.—Some cut on the serve.
Wildhaber—Oh, Bill, but you hit that too hard.
Flory—Dark horse.
Geissler—Great on love games.
Keegan—New, willing, but young.
Bob Burns—McLaughlin's rival for smashes (over to Dewey Ave.)
Mesropian—Reverse demon of courts.
Crowd—(Obie) Hits 'em too easy.
Alex Young—Make them bounce or I can’t win.
Ross-Horten—Exempt from criticism.
Moyer—I bean going to practice more.
SOPHOMORE DOPE

Dr. Schultz: "Mr. Aten, what else may happen locally in the intestine in typhoid fever?"

Aten (our Wild Bill): "—!!??!!?!?"

Stage Whisper from the Rear: "Hemorrhage!"

Aten: "Hem—"

Schultz: "Did you get it?"

In Bacteriology Lecture—"In the making of the two daily necessities, bread and beer, we are dependent on yeasts."

Greek Roots Up to Date—A soft fibroma is called a "fibroma mollie." Schultz says this is undoubtedly the derivation of the term "mollycoddle."

Miss Sisler blew into Path Lab the other day and announced that she had just seen a case of suprarenal fat at the County hospital.

Anderson had us all over to the County hospital last Tuesday, making physical examinations. He had been listening over the apex of a heart that gave three distinct sounds. To illustrate to some of the boys how these were related, he drew three short lines, thus — — — on the man's belly. He happened to get the lines just below the ensiform cartilage about in the mid line. Undine strolled up just then, pushed between the rest of the boys, put on his stethoscope, and very gravely began to listen over the marks. Somebody murmured that if they would only put the marks on the wall he would probably go over there and listen to them!

All the boys smoked the other day on the new Phi Rho that was just pledged. Parks, you are surely getting away—and they tell us he's some boy!!

But one of the fellows from Minnesota wasn't so lucky. While out getting a few flowers over in a neighbor's garden—to his congratulations to Brother Park—friend Undine carelessly tripped over the wire and dislocated his arm.

Our other blemished rack-bird of dermatitis fame has returned to the roost again. Greetings, Riley!

Fred Colbert, first day in drug room at dispensary, gets prescription for "olei ricini." After looking over the shelves for some time he asks Losey, where the "oleoresin" is.

OMAHA DAY FOR THE PREMEDICS

May 23 will be visitors' day for the Premedics from Lincoln. On the evening of May 22 the faculty of the College of Medicine will hold a reception at Jacobs Hall in honor of the Senior class and its friends. All the other classes are invited to attend. On the next day, Saturday, the Premedics will invade Omaha, and various clinics and hospital trips are being arranged for their edification. It is confidently expected that a large number will turn out, and the school will certainly be ready to entertain them.

NEW CATALOG OUT

Advance copies of the new catalog have just been received from the University Press, and may be obtained in the office. We have been telling you all about this new catalog for some time; now we don't have to say any more. Go get a copy and see for yourself.
Dr. Wilkinson addressed the students Thursday, April 30, at a morning convocation. He briefly referred to the Mexican situation, and then entertained us for the rest of the hour with a brief resume of his work in connection with the hookworm disease in Porto Rico. He was connected with the government investigation at that place, and gave us some interesting sidelights on the governmental and sanitary conditions which the workers were obliged to meet there. During the course of the investigation over 700,000 cases were handled in this small island alone.

VISITOR AT THE BUILDING.

Dr. Herrick, internist on the staff of the Presbyterian Hospital and of the faculty of Rush Medical College in Chicago, was a visitor in the building Thursday, April 30.
The April number of the Journal of Experimental Zoology contains an article by Dr. Claude W. Mitchell entitled "Transmission Through the Resting Egg of Experimentally Induced Characters in Asplanchna Amphora." In this as well as in former papers, notably in "Sex Determination in Asplanchna Amphora," some of the most profound and recondite biological problems are attacked experimentally. Dr. Mitchell's conclusions on sex determination have aroused the interest of specialists abroad working along similar lines. Of these, Chas. Rouselet of London, Arnold Lang of Dresden and Creswell Shearer of Clare College, Cambridge, England, in correspondence with Dr. Mitchell have commented upon his work in most favorable terms.
One of our esteemed classmates, Miss Elizabeth Mason, will not be with us for a few days as she is minus her veriform, but still she is at a Wise(r) place.

Our speed king, Geissler, will be with us only occasionally now as his gru****zis** is taking a great deal of his time.

Dr. Christie is very anxious to see that Keegan does not miss his class again for a tennis match.

The class had its annual holiday Friday afternoon at 2 o'clock. The class is now in labor, but Dr. Pollard hopes to get all through without the use of forceps and strong traction.

Our friend, Jackibus Berry, has been handed his parole from the Houses Pestis and adorns one of our rear seats as before, ever stately and learned.

Johnston has most of the class bested in nematodology, as he has "seen 'um" fourteen inches long.

Some of the members of the class went out Monday afternoon to see Florence, and report that she is a real nice entertainer.

Hattie Orvis, our demon student, is also a great lover of colors, and among her latest favorites are faded light tan to eirese, depending upon the weather.

Our little "Sunshine" had another attack of convulsions the other day, due to some tart remark on the part of some unawaring bystander.

**SENIOR NOTES.**

At a recent class meeting the Seniors decided to accept the responsibility for one issue of The Pulse. It is expected that this announcement will cause a furor of excitement, and well it may, for this will be a great edition. High brow stuff from the Widow and "Deacon" Young will be mingled with low comedy by "Chuck" Moon and Hi Burns. Many other characteristic offerings will be made by the other members of the class, among them Beany Moyer's essay on "How to Execute the Get Away Movement." In short, this edition will furnish you more genuine information and excitement than a war extra.

Charles Harms attended the graduating exercises of the Wise Hospital nurses. Following the graduation there was a dance, and on the following morning Charlie was seen wearily endeavoring to master the tango step while he pushed a dizzy surgical cart through the halls.

Examinations are with us again. It seems as if someone is all the time suspecting us of not knowing all we should know. But after May 28 no one will ever presume to do so.

One of our men who still attends Dispensary clinic tells of reading this from a Soph's history card: "Mrs. ______. Age 42. Gave birth to twins in December. Had 606 following February."

Jack Goodnough has been nursing a sprained ankle for the past few days.

We have been informed that the faculty is planning a reception for the Seniors on the 22d of May, which reminds us that the time is growing short and that this despicable weather is cheating us out of the holidays we have planned.
MISS MASON IN THE HOSPITAL.

Our editor, Miss Bess Mason, was operated on for appendicitis last Friday morning at the Wise Hospital. Dr. A. C. Stokes performed the operation. Miss Mason is getting along nicely, and we all hope to see her out again soon.

We are looking for a tall, handsome chap, rather young, who bought a huge bunch of carnations Saturday and sent them up to dispensary by a messenger boy. As you will remember, if you were venturesous enough to appear on the downtown streets Saturday, there were just oodles and oodles of pretty girls at every corner selling carnations for the benefit of the Swedish Mission Hospital. Of course every good looking man bought at least one, but this particular young man bought a whole bunch of them, and then hired a messenger boy to take them to the dispensary. He paid for them, too. We have the enthusiastic messenger boy's word for this. But nobody knows who he was. One thing we do know—that it certainly cheers the heart to know that there are such people.

NU SIGMA NU INITIATES.

On Friday evening, April 24, Nu Sigma Nu initiated the following men: Dr. O. T. Schultz, Dr. C. R. Kennedy and F. E. Bocken. On Saturday evening, April 25, the annual banquet was held at the Loyal Hotel. About fifty members, active and alumni, were present.

One of the advantages of taking pre-med work at another school is that everyone hasn't "got your number." But the truth will out.
Case reported by H. D. Burns, ’14:

Mrs. M., thirty-two years old, is a housewife of good habits and good family history, except for one sister who died of pulmonary tuberculosis at the age of twenty-four. She had pneumonia when seventeen years of age and again three years ago. Her lungs have been examined twice since then and were said to have been sound. She has had no other sickness aside from the simple childhood diseases.

Eighteen months ago she began to feel weak, lost her appetite, and felt some nausea and faintness. She kept at work, however, until January, 1914, when she was taken to a small hospital out in the state and later returned home very much improved.

Some time after this she had jaundice. She was treated with calomel, but did not improve. She attempted to assume her duties as a housewife in March, but broke down again and since then has been too weak to accomplish anything. She has at no time had any pain, but her weakness has gradually become so troublesome that she finally came to the hospital a helpless invalid.

Her appetite has been poor throughout this illness, and for the past two weeks she has eaten almost nothing because she cannot bear the sight of food. She has had some vomiting, no pain anywhere, and but little constipation. Of late she has taken very little interest in her surroundings and has been very drowsy most of the time, taking only a small amount of broth when urged to do so.

She has lost thirty pounds since the beginning of her sickness and now weighs 93 pounds.

On examination the patient is emaciated. Her breath has a fruity odor. Her skin is of a dark yellow hue with a normal appearing sclera. The areola of the nipples is darker in color and the mucous membrane of the mouth shows a dark brown pigmentation just inside the left cheek at the corner of the mouth.

There is slight dullness in the apex of the left lung and the left supra clavicular fossa is more depressed than the right. Breath sounds over the left apex are not heard as high up as on the right side.

Her heart is negative except that the sounds are faint. Her pulse is of low tension and varies between 85 and 105 beats per minute. Her blood pressure is 60 mm. Hg. The edge of the liver is just palpable below the ribs on full inspiration. The knee jerks are absent. There is no edema; the urine is negative. The temperature usually shows a rise of one or two degrees above normal in the afternoon and has on a few occasions sunk to 96.8 in the morning.

Red cells are 4,820,000; white cells, 17,200; Hgb., 85 per cent; 73 per cent of the leucocytes polynuclear, the remainder lymphocytes. The blood is otherwise normal. Special search was made for malaria parasites without result. The stools showed nothing abnormal. The vomitus showed a total absence of hydrochloric acid. The tuberculin reaction was strongly positive, twenty-four hours after inoculation.

Diagnosis—Addison’s disease.
Differential Diagnosis—Anorexia nervosa may produce a condition even more serious than the one now under discussion. This condition has even been known to end fatally. But, in view of the fact that sufficient organic derangement is found to rule out any hypothesis we are safe in disregarding neurasthenia in this case.

Cancer of the stomach might possibly occur at this early age, although it is rare. One of its earliest symptoms is often a complete loss of appetite, such as this patient has suffered. The absence of hydrochloric acid in the vomitus would seem to support this hypothesis. On the other hand, in a patient so markedly emaciated we should expect to feel a tumor, especially as the symptoms seem to have lasted two years. Other gastric symptoms, such as stasis and vomiting, would have appeared before this in a case of gastric cancer.

The patient’s yellow color, together with a regularly intermittent fever, suggested the possibility of malaria, but this was proven to be out of the question by repeated negative examinations of the blood.

As there was no discoloration of the conjunctiva and no bile in the urine chronic hemolytic jaundice was not considered.

The absence of knee jerks is not explainable by any of the diagnoses thus far considered. There is no sufficient reason to consider tabes, as there are no sensory, pupillary or sphincteric changes and no pain.

Addison’s disease produces the lowest blood pressure that has been observed in any disease due to the lack of adrenal secretion which, as has been proven, exerts a powerful constrictor effect upon the blood vessels. It is often associated with gastric symptoms and severe asthenia such as this patient has experienced. The above symptoms combined with the pigmentation give us a syndrome typical of Addison’s disease.

Pathology—The suprarenal glands would probably show the fibrocaseous degeneration which is so typical of the localized tuberculosis that causes about 80 per cent of Addison’s disease. There would be widespread cicatricial involvement of the sympathetic system and probably an obsolete tuberculosis of the apex of the left lung.

Statistics showing the high percentage of cases of Addison’s disease that are dependent on tuberculosis as a cause, combined with the positive tuberculin reaction, aid us in determining the pathology in this case.

Treatment—The patient should be confined to bed and restrained from all active movements. Arsenic and strychnine are administered for the debility, while we use cracked ice, champagne and hydrocyanic acid for the irritable stomach. Open air treatment and a light nutritious diet as in the treatment of tuberculosis are to be advised. Tuberculin may be tried, but with little hope of success in such an advanced case.

Adrenal therapy should be tried, but there is little hope of success to be expected in this case, because it has been discovered that while the administration of the gland extract is productive of brilliant results in some cases, it is invariably useless in the treatment of that form of the disease which is due to tuberculosis of the glands.

Prognosis—The prognosis is bad in this case for reasons stated
above. Further, it has been observed that the cases in which the bronzing is slight, as in the case under consideration, run a more rapid course and may terminate fatally in five or six weeks. Very rarely does a patient live over four years with this disease.

FRESHMEN NOTES

Tennis rackets and shoes are now in demand, so that the fellows may be excused from Chem. Lab. and enjoy a game of tennis.

A fine-looking young fellow, Ross by name, while trying to invent a compound of alcohol and nitric acid, which might be of service in the coming war with Mexico, produced a noise that made the class think that Mexico was blown to atoms. He is now wearing a new suit, and his face and arms resemble a leopard’s skin.

Lake and Andrews lose their interneship at the Child’s Saving Institute since the coal-shoveling season is over.

Davis (defining a colloidal solution): “A colloidal solution absorbs water.”

Dr. Cutter: “So does a sponge.”

Several of the Freshmen class have been experimenting upon the effect of suggestion. The victim was Talcott, who came to school in the best of health, and upon being told that he was sick, immediately went home and remained in bed for three days.

The “Tappa Kegga” will meet May 9 at “Fatty’s Place.” Bring nothing but your empty stomach.

Buy Wildhaber’s book on “Luxus Consumption;” you’ll get Brix’s “Enzymes in Beer” free with it.

Sherwood diagnosed a case of wooden leg as stiff knee. At present he is running around with a star, representing the board of health trying to find out what and how much you eat and drink.

IN LIGHTER VEIN.

WILLIAM THE PORTER—HIS PHILOSOPHIZINGS AS RECORDED BY BRUCE LOGAN.

“A dozen sugar-coated tabloids for t’ carman an’ half-a-dozen cashays for t’ sweep’s lass,” echoed William from behind the chloride of lime cask. “Ay, that’ll be t’ new young doctor, I suppose.”

“There’s an indication for ye now of the age we live in. It’s far too luxorious.”

“Can’t see it, can ye not? Well, that’s extraordinary.”

“But I’m forgettin’ that ye’ve only been in this world some eighteen years all told, an’ I’ve lived fifty year longer. So it’s mebbe not so extraordinary after all.”

“Now in my young day, before th’ trade became a profession, folk took their medicine as they took life—in full dose an’ without sweetin’. It was two-ounce o’ black draught at night an’ a ‘blue pill in t’ mornin’. An’ not over much French chalk on t’ pill.”

“But nowadays a pain in t’ stummack means a course of saccharine-covered buttons an’ an operation for ‘pendicitis.’"
"If t’ plumber’s lad cuts his finger he’s whisked off to t’ hospital in an ambulance an’ sterilized all over on a marble slab. Then he’s put into a cot an’ two nurses squirt serum in to keep off the germs."

"Necessary precautions? Well, that may be. But in my day we washed t’ finger in warm water an’ put a clean rag round it. Then t’ lad went back to his job."

"Ay, it’s different now, I grant ye. But how much better are we for all this coddlin’? I’ve watched things close, though ye may not think it an’ I’ve noticed that just as many die i’ doctors’ hands as used to."

"Not that it’s all t’ doctors’ fault. They’ve their livin’ to get like ourselves. It’s because we’re gettin’ too luxurious in our habits."

"We once had a terrible clever young chap as junior here—he’s a Major man now, they tell me—an’ he used to say this generation was over-civilized."

"I’m not just quite sure what he meant exactly, but suspicion it had something to do wi’ t’ physic nowadays bein’ easier to take an’ not so powerful in results."

"Ay, that may be it."—Chemist and Druggist.

THE BANANA FISH

The description of the Whiffle-Bat in a recent number of the Pulse calls to mind the banana fish which is indigenous to northern waters. Having anchored your boat well out in the lake you make a hole in the water by plunging your oar full length and then withdrawing it. Place a good-sized sponge near the edge of this hole and wait. Soon the banana fish comes up the hole and eats the sponge, which swells up, making the fish too large to get back into the hole, so his capture is easy.

A DISEASE THAT IS RARE

Mrs. Juniper entered the doctor’s office, dragging by the hand an overgrown boy of fourteen. She was excited and impatient; he was dogged and glum.

"Oh, doctor, he has lost his voice! He hasn’t spoken a word for two days!" she said.

The boy looked at her sullenly, and suffered the doctor to hold his face up to the light.

"Open your mouth. Hm! Tongue all right?"

"Ya-ah."

"Hold your head up and let me look at your throat. Seems to be something the trouble there. Push your tongue out. Now pull it back. Feel all right?"

"Ya-ah."

"Why, Mrs. Juniper, there is nothing the matter with him," said the doctor impatiently. "Boy, why don’t you talk?"

"How can I when I ain’t got anything to say?"
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