sides are the above-mentioned places. Delicate visitors are generally inhabitants of all the other quarters, such as Long-Change, St. Etienne, Carabacelle, etc.; and some of these are completely sheltered. In fact, those who live in these quarters, when that chilly wind blows, are accustomed to say, "It is better not to go to Nice to-day."

The Italian proverb I recollect well, "*I paragoni sono sempre odiosi*" (Comparisons are odious); so I do not intend to make any remark on Mentone, which I will say, as much as Dr. Bennet says, is a suburb of Nice. In fact, for both these places, very good warnings are given to avoid chilly and cold wind; pleurisies and pneumonias being the prevalent diseases of the inhabitants.

San Remo is a town of about ten thousand inhabitants. It is situated on the slope of the hills, facing quite the south; surrounded at its back and two sides by high mountains, which, gradually coming down to the sea, are prolonged on each side of the town, making the situation the most beautiful and picturesque, the most sheltered, mild, and healthy spot that can be found on the Mediterranean Sea. Lemon-trees are at Nice, more at Mentone, but many more at San Remo. Olives and lemons are the principal productions of the place; and the lemon-gardens are of such an extent that, when the olive-crops fail, lemons afford ample compensation. A good short description of the place may be found in Murray's *Guide*. Two pamphlets have been written lately by two medical men of San Remo. San Remo and its neighbourhood is still my favourite place. The inhabitants are most honest and obliging. Several villas and other houses are ready for visitors.

Delicate people, who cannot resist the temptation or *amour propre* of constantly giving or going to parties, who cannot keep themselves at home or at the above mentioned sheltered places at Nice on those few days in the year when the cold wind blows, I advise to go and live altogether at Mentone, or, better still, at San Remo.

I do not intend to repeat the very good observations which Dr. Bennet makes about consumptive patients. I once published in a Nice paper my opinion, that I have always observed the most favourable influence of the Nice climate on the consumptive people of a lymphatic, strumous constitution; and also in an advanced degree of the disease. The same cannot be affirmed of subjects of nervous, excitable temperament, on whom the air of Nice, I suspect, acts with more power. For them, Pisa or Rome is suitable, if they do not prefer Madeira or Egypt. Tubercular deposit may be absorbed; cavities may heal; but, as Dr. Bennet says, those who are in the latter stages of the disease are better at home.

Without flattering the author of the book on Mentone, I quite agree with its expressed medical opinions and general observations of the inconveniences attendant on the other Italian towns. But when he speaks about Naples, I think the description rather written when excited by the complaint under which he was suffering there; and so excited that he does not exclude one "of the five hundred thousand dirty southerners" who are living in the largest and handsomest town in Italy; the inconveniences of which, I can assure my friend (who, I expect, will give allowance to my national feeling), will in a great measure disappear when the Italian free constitutional government shall have driven away all the remains of the last despotic government.

For a long residence at Nice, April and May are the most delightful months. The varied drives and walks towards the valleys remind one of the Swiss summer.

The air which is breathed in those valleys, mixed with the perfume of the flowers, and oranges, and gardens of roses, is healthy and delicious.

I conclude by saying that Nice, Villafranca, Munich, Mentone, Bordighiera, San Remo, Riva, St. Stefano, in

climate are the *fac-simile* one of the other. When the railway passes along these places, not a more charming, varied, healthy winter residence can be found in the world.

CASE OF RESUSCITATION.

By EDWARD GARRAWAY, Esq., Faversham.

THE following case having some bearing upon the agitated question of how best to resuscitate the recently drowned, or recover those dead from apnoea, I venture to forward it for publication.

A patient of mine was delivered a few days since of a child of inordinate dimensions. After the birth of the head, a delay of some ten minutes intervened, in consequence of the great breadth of the shoulders; and the child was eventually expelled, apparently dead. The heart's pulsations being perceptible, Marshall Hall's manipulations were immediately commenced, with the effect of inducing a slight gasp at intervals of about half a minute. After a short time, the respiration not improving, and the surface growing cold and congested, a warm bath was had recourse to, cold water at the same time being sprinkled on the face and chest. These measures appeared to give a fresh fillip to the respiratory efforts; and again the semirotatory movements (the infant being wrapped in flannel) were diligently practised. Ere long, however, the surface again grew colder and claret-coloured, and the breathing did not improve. Another hot bath was used, together with the cold sprinkling, with more marked benefit than before; the surface assuming a florid tint, and the inspirations becoming about three in a minute. Once more, Marshall Hall's method was pursued; and at the end of three quarters of an hour, by these alternations of treatment, the respiratory function was sufficiently well established for the infant to be left to itself.

In this case, it can hardly be disputed that, however largely the successful result may be attributable to the "ready method", some little credit at least is due to the hot bath, which, it is hardly necessary to say, was used for the sole purpose of keeping the blood in the superficial capillaries in a fluid state; had the surface of the body become much colder, it is questionable whether, from coagulation of blood in the minuter vessels, the systemic circulation could have been carried on.

Mr. Jennings has, in his recent paper, made some valuable observations on this subject, touching lightly upon one point, which would seem, however, to demand very careful consideration; namely, whether the same treatment is applicable to all cases of apnoea alike. That is to say, Is a person who has died from a discontinued supply of oxygen, as in the drowned, in the same category with another who has failed to live from a non-supply of the same vital air, as in the still-born? Those most important organs, the lungs and the skin, are in each case in a totally dissimilar condition; in the one instance, their functions having been developed and carried on for a certain time; in the other, these functions having never yet been excited at all.

IMPORTATION OF CURRANTS INTO THE UNITED STATES. About twenty-two years ago currants began to be imported into the United States, and the cheap prices prevailing for a long time made this fruit to be within the reach of all classes, and between 3,000,000 and 4,000,000 lbs. were annually consumed, the price being about four and a half to five cents per pound; but since the year 1851, when the sickness of the vines prevailed, the prices were pushed up from five to twenty-five cents per pound, and the importation into this country was almost stopped, so that in the year 1854 we find that the importations amounted only to 219,118 pounds, which were sold at an average price of twenty cents per pound. (*Merchants' Magazine*.)