

old gentleman was a good deal worried, for to consent to anything like an engagement for either of his dear nieces with such a harum-scarum idler as Charles Merriman was out of the question altogether. So—happy thought!—he would make her work in the garden by his side as often as possible just now. Dear old Mr. Singleton! The innocency of the garden was to him a refuge at many times.

“Now, Nellie, my child, come and help me this morning cut back some roses, as I want to retard the

bloom of a few of them, and they must be cut back, as you know, to two eyes. Here, I will do some with you.”

“Two eyes!” Yes, and there were the two mischievous eyes of Charles Merriman not far off as he spoke. But the old gentleman had his way, for he felt that he was not then to be trifled with; and so it came about that Charlie Merriman went off with a whistle, and thought it wisest for the time being to go for a sharp constitutional with Tom and George.

INFLUENZA—AND AFTER.

BY A FAMILY DOCTOR.

INFLUENZA, or “the complaint,” first came to England in the year 1510. To the reign of Henry VIII., then, we owe this among other blessings. It is an older family heir-loom than the potato, and the Reformation. The latter fact is, we believe, without theological significance. But that the appearance of the complaint should have coincided with the decadence of Papal power in this country has not received any polemical application, is perhaps surprising. A certain class of doctrinaire seems to have missed a congenial opportunity. That the very great widower had it, is improbable. At any rate he must have had it very lightly and forgotten it, otherwise, in later days, when beheading became a habit as inveterate in him as snuff-taking in old time blue-stockings, he would have made it an excuse for beheading some body. We know that he accused Wolsey of giving him one disease by breathing on him; that disease was not influenza. If he had known its grip personally, he would have recognised its value as a plea for execution, as it is very catching. But the epidemic long preceded the days of Henry’s greatest theological feats. It came long before the days when the great unmarrier applied the doctrine of development to the question of matrimonial obligations, with results that have rendered his name a household word.

“The Complaint” of David Lindsay belongs to the same reign. But the complaint of David Lindsay was not what is now known by that name. It was not influenza, it was a poem written to say he was hard up. Lindsay was cured by King James with a knight-hood and a salary; but the disease is common still.

Influenza, then, is a very old disease, and we have had many epidemics in England. The last was in 1847; and as we have enjoyed such a long immunity we have had a severe epidemic. However, we hope 1892 will see the last of it, for one attack protects generally against another, and the susceptible people who are to form the soil for the fungus to grow, must be getting scarce. With the influenza, it is to be hoped, will disappear the noxious practice of taking powerful drugs as “preventives.”

The best preventive, depend upon it, is to avoid infection and to keep yourself in good health. If each case could have been isolated, the epidemic would probably have been comparatively trifling. The things to avoid are those which depress the system: late hours, irregular meals, worry, and overwork, and fatigue. Avoid chills and taking cold, and dress warmly. These precautions are extremely important to all, and increase in importance for persons over forty, especially those over sixty.

Such a state of siege is irksome, but you can revenge yourself when you are quite certain that the epidemic is over. Take a lesson from the cautious Scot who was afraid to die before he had forgiven his enemy with whom he had a long feud. He sent for this person, stated his conviction that he was dying, and formally forgave him. “But remember,” said he, “if I should recover, things must go on just as before.”

People who have got the influenza should go to bed at once, and send for a doctor without delay.

The period of convalescence from influenza is full of pitfalls, and is often very prolonged. Relapses in cases which at first seemed very slight are extremely common, and very often dangerous. Many of the fatal cases have been due to early neglect, and the only plan is to see a doctor, and remain under him till quite well, however slight the attack may seem at first.

This prolonged convalescence—the patient continuing weak, short breasted, pale, and bloodless, liable to recurrent pains in the limbs and back, suffering from neuralgia, want of energy, indigestion, and perpetual colds—is a very disheartening feature of the disease. But it *is* a feature of the disease, and should be recognised as such.

The causes that predispose towards this tedious invalid state, are making too light of the disease at first; not remaining long enough in bed; neglecting to get change of air after the attack; want of treatment by tonics, and other remedies appropriate to the individual, and finally getting back to business, and resuming the ordinary occupations or pleasures of life before the patient is fit for it. The state is full of dangers. The patient is an easy prey to a severe cold, which may end in inflammation of the lungs and carry him off.

Neglect of this stage in the attempt to "shake it off" is a fruitful source of even fatal illness. Yet almost all persons who take proper care of themselves recover.

To give advice suitable to all cases, is clearly impossible. In the convalescent stage it is the individual patient with all his peculiarities, hereditary and acquired, that has to be treated; not the disease which has passed away. This can only be done satisfactorily by his own family doctor. Still a few words of general advice may be of service in helping people to recover from influenza.

In the first place do not put any faith in a certain cure or specific. No two cases of influenza are alike, and each has to be treated on its own peculiarities, and those of its unfortunate owner. There is no one drug for influenza. Take any three cases of influenza. A time may arrive when one of these may present chiefly the characters of a convalescent from severe bronchitis; a second, those of a troublesome and painful case of indigestion; while the third may show itself as a profound and intractable nervous depression. To treat these with one drug would be as rational as if a doctor were to tell his surgery boy that it did not matter which patient got any particular bottle of medicine provided they got one all round. This would be little less absurd than the conduct of that guileless sea captain who had his remedies numbered—*e.g.*, number seven for bronchitis; but, finding himself out of number seven, mixed numbers four and three, under the belief that as the numbers when added together made seven, so the remedy for the toothache when added to that for chilblains would be of great service in bronchitis.

In giving advice concerning the management of ourselves during convalescence from influenza, it is necessary that the reader should have a clear conception of the malady. Influenza is a disease due to a particular fungus entering our bodies, and growing there just as in scarlet and other fevers. Now the germ, fungus, microbe, or whatever name you choose to christen it, or stand godfather to, in influenza, has a very distinct preference in the matter of its headquarters. It prefers the top of the spinal marrow just where it joins the brain. Now this is a most important part of the body. It is the head office which regulates digestion, breathing, and the action of the heart. It is as if the vile creature tried to poison and starve, to strangle and stab you to the heart at the same time. It is the part butchers aim at in pithing. It is the part which occupied much of the attention of that benevolent gentleman, the late lamented Mr. Marwood, in his efforts to facilitate and render painless the exit from an unappreciative world of those persons who had been too servile imitators of Henry in his matrimonial views, or who had replied by a revolver shot to a policeman, who was at the pains to remind them that the house they were making themselves so much at home in, belonged to someone else. The fact that these burglars, the influenza germs, select such an important part of the nervous system, fully explains the want of *morale*, the

terrible weakness and trembling of the limbs, the neuralgias, the confusion of mind, the loss of memory which so commonly follows the complaint. The regulative influence of this nervous centre over heart, lungs, and digestion, explain the feeble pulse, the long-continued breathlessness, the persistent distaste for food, and the painful indigestion.

Now to combat all these, there is no doubt that it is most important not to try to shake it off, but to rest. Even if you are supposed to have returned to your work, lie down whenever you feel the weariness; if you can, go to bed early, and let your hours in bed be prolonged; then your strength will gradually return. Do not try to walk it off; it is very dangerous to play with damaged nervous centres, and you may lay the foundation of insidious disease.

Change of air, like rest, is also very important, and generally a rather bracing atmosphere is best, but no rule can be given. Many of the patients are really convalescent cases of bronchitis, and must be advised as such. Almost all types of influenza convalescents are extremely sensitive to the slightest draught. Still change of air with its change of scene, absence of business, and rest are most important, and may be resorted to a second time with benefit, if the convalescence lags.

Gentle exercise in the open air, short of fatigue, warm clothing, and avoiding chills and colds—these are directions which apply to all. And all require a supporting line of treatment.

Drugs are generally required in convalescence, but they must be given according to the case. Iron and quinine in large doses often upset some stomachs, and yet may be beneficial in other persons. Cod liver oil may be useful in some, and would make others ill, and so on. Your own doctor is the only proper guide. There is no specific, and all depressing drugs are bad.

Diet is a question most difficult to advise on in a general way. Often, there remains great distaste for food, and painful indigestion; yet the patient is in a state which requires support. The proper course is not to give in to the patient's distaste for food, but to find a variety of easily digestible and nourishing foods, and to give little at a time but often. The patient is not only suffering from indigestion, but also nervous prostration. If he has a good digestion, we are tempted to feed him up with fish, fats, and other things, which are so good in some cases of nervous prostration. But after the influenza, the stomach will often not stand this proceeding, so we must persevere with small quantities, often repeated, of things un irritating to the stomach, and yet nourishing, together with appropriate drugs till his system is restored to such a state that it can make sufficient gastric juice to digest the food thoroughly, making plenty of blood to nourish his exhausted nervous centres, and then will disappear the tremors, the neuralgia, sleeplessness, weakness, and confusion of mind, showing once more that pain is the prayer of the nerve for healthy blood; but our motto must be *Festina lente*, or the most haste, the least speed towards perfect recovery.