

to resist all the therapeutic means which have been directed against it. The gaseous rectal injections have been succeeded by subcutaneous injections of eucalyptol, to be followed by the inhalation of sulphurous acid, and particularly hydrofluoric acid. During the past year inhalations of sulphurous and hydrofluoric acids have been experimented with, side by side in my service at the Cochin Hospital, and have given some comparable results. That is to say, in certain cases they have modified expectoration and diminished the cough without having the least action on the bacillus itself. In the thesis of my pupil, Dr. Dariex, may be found the results obtained from the inhalation of sulphurous acid. As for hydrofluoric acid, we have never seen any action on the bacillus, our results being very ordinary and not comparable with those given by Dr. Hérard. It ought to be recognised that a hospital is a very poor place in which to obtain the cure of tuberculosis, since the hygienic conditions are detrimental to the tuberculosis patient.

To-day, when hygienic conditions appear to have become almost the exclusive treatment of tuberculosis, we can understand the difficulty of obtaining the cure of tuberculosis in our hospitals. For my part I think that those have passed to the other extreme who state that the active treatment of tuberculosis consists solely in the stringent application of a special hygiene, a hygiene based upon alimentation and a life in the open air. Everyone recognises its value as a coincident medication. I think, however, that to calm the cough, produce sleep, reduce the fever and sweats, and diminish the diarrhoea, it will be necessary to have recourse to medicines, and that in any new plan the treatment of tuberculosis ought to be a complex one, where I consider that hygiene ought to occupy the first place.

Of all the antiseptics proposed for this purpose one alone seems to be of real value, that is, creasote. In Russia I have been shown by Dr. Offanassiew some remarkable results obtained by administering this medicine in very large doses. But it is necessary to have a strong stomach to withstand the large doses of so irritating a medicine. In France, Gimbert should have obtained good results by injecting sub-

cutaneously large quantities of this substance. But before pronouncing on this method we will have to wait for his results and method of procedure.

If chemistry has given from the aromatic series some new medicines its many antiseptics, analgesics or antithermics, still it is in the vegetable kingdom that we find those drugs which are most active in augmenting the muscular force of the heart; and to this curious fact I draw the attention of my colleagues. How to explain that whilst in the aromatic series we have numerous rivals to morphine and aconite, we have not yet been able to discover a heart tonic, but must have recourse to drugs of vegetable origin. Digitalis, which remains the medicine *par-excellence*, has been joined by caffeine, convallarine, then sparteine, and last, strophantine.

Now convallarine is abandoned, and this results principally from the appearance of sparteine and strophantine, which appear to be much superior to it. Sparteine has found a new application in the hands of Ball & O. Jennings. They use it to combat with the state of syncope which often follows in morphomaniacs, when the morphine is withdrawn. In these individuals morphine acts as a tonic. It stimulates the heart, increases the circulation and raises the temperature; but when the use of this drug is discontinued, the heart deprived of its excitant, can no longer perform its duty; the patient is then subject to syncope, presenting often great seriousness. Sparteine, in stimulating the contractions of the heart, causes the symptoms to disappear and allows us to deprive the individual of morphine without causing grave accidents. As sparteine is soluble, it can be administered by subcutaneous injections, and thus the injections of morphine can be replaced by injections of sparteine at the time when the former were usually administered. Five to ten centigrammes of sulphate of sparteine can thus be administered.

It was Fraser who first showed us the benefits to be derived from strophanthus in the treatment of cardiac affections. It is indeed a marvelous heart-tonic which will be of great service to us, because it is a medicine easily tolerated, which has not the cumulative nor emeto-cathartic