

formula advocated by Dr. Burney Yeo, *i.e.*, 40 minims of strong hydrochloric acid are poured on to 30 grains of powdered chlorate of potassium in a 12-ounce bottle, which is filled up gradually with water, the mixture being frequently shaken as the water is being added so as to absorb the gas as it is evolved. To the solution when made 24 grains of sulphate of quinine are added, and of this an ounce is given every two or three hours until convalescence is reached. Care should be taken that an interval elapses between the administration of the medicine and the next feed of milk, which otherwise is liable to undergo some clotting in the stomach as a result of the admixture. Under this treatment the tendency to intestinal fermentation certainly appears to be lessened, and the strength of the circulation is usually well sustained, with corresponding benefit to the general aspect of the case. In some instances, it must be confessed, the result is disappointing, but in cases which come early under treatment, the course of the disease is usually favorable.

During the last two years I have treated a series of cases with the essential oil of cinnamon. This agent was suggested to me by Dr. J. Carne Ross, of Withington, near Manchester, who had been much impressed with the exceptionally favorable course pursued by several attacks of enteric fever which he had treated with it. It was in view of his anxiety that its value should be tested on a more extensive scale that I was induced to give the cinnamon a trial. The results, as far as they go, have certainly been favorable, but the number of cases in which I have tried the drug is not yet sufficiently large to warrant a conclusion of very general application. Up to Sept. 30th last the number of cases treated with the cinnamon has been 147, not counting a few patients in whom its use had to be discontinued after a few doses, in consequence of its having induced vomiting. Of these 147 cases 14 died, representing a mortality of 9.5 per cent.

It is far from my intention to urge the claims of any therapeutic agent merely because the death-rate in a particular series of 147 attacks happens to come out somewhat lower than the average under other methods of treatment. The drug would have to be tested in a far larger number of cases before any trustworthy inference as to its value could be drawn from a consideration of the death-rate alone. As an illustration of the fallacy of generalizing from insufficient data, I may mention that of the first 50 cases treated with oil of cinnamon only two died, whereas, amongst the next 50 no less than eight proved fatal. After careful observation of the progress of the individual cases comprising the series I can only express my firm conviction that the in-