

can obtain a fair idea of the size and outline of the red cells and whether there be any marked increase in the white forms.

Color preparations will not be necessary in cases of simple Anaemias or in chlorosis, but should be prepared in all grave and pernicious Anaemias and in Leukaemias and other cases of white cell increase.

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NOTES ON SOME MEDICAL CASES.

TYPHOID FEVER AND PNEUMONIA.

DURING the past six months I have attended, in the Kingston General Hospital, seventeen cases of Typhoid Fever. Some of these cases may perhaps prove of interest on account of their complications and sequelae. The ages of the patients were as follows:—15 years and under, three cases; between 15 and 25, 7 cases; between 25 and 30, four cases; between 30 and 40, one case; one case 52, and one 60. Eight of these cases were males and nine were females. The treatment adopted in all but two cases was symptomatic. The other two cases, one a girl 18 years old and the other a girl 17 years old, were treated exclusively by the cold bath. Both of these cases ran a regular course and were uncomplicated, the convalescence regular and uninterrupted. Of the other 15 cases, some exhibited complications and sequelae which, though, perhaps, not unusual, were interesting. I shall refer to them in detail.

R. P., male, aet. 23. Treatment, symptomatic. Temperature declined at the usual period. Patient then had a chill—complained of pain in the back.—On examination a circumscribed red spot was found which rapidly developed pus. This was opened and relief obtained. This abscess was followed by a number of others at various points over the body—they were treated similarly. As soon as the first abscess was noticed the patient was put on Calcium Sulphide. He made a good recovery. What was the cause of the multiple abscesses? Was it a case of auto-infection, or an absorption of septic matter from the ulceration of Peyer's Patches?