

mended by this Board, have, when intelligently and zealously carried out in practice, a powerfully restraining influence in the spread of diphtheria. But this is not enough. The brilliant cures, which have been obtained by practitioners in Germany, France, and England, who have used antitoxin in treating their cases of diphtheria, make us feel anxious to imitate them, and we now confidently look forward to therapeutic results in the treatment of this disease, quite different to any with which we are, so far, acquainted.

In the Section of Bacteriology of the International Congress of Hygiene, which met last month at Buda-Pesth, Dr. Roux, of Paris, read a very valuable paper on the prophylaxis and treatment of diphtheria. I shall not endeavour to present his views on the principles of serum-therapy, except to mention that he distinguishes two kinds of antitoxin serum; one which preserves against the toxine, and the other against the living virus. He thinks, that the immunization of animals should be effected by means of small quantities of vaccines frequently repeated. The serum, obtained at the spot in the body where the bacteria are injected, is much more active than normal serum.

Referring to the clinical side of the question, Dr. Roux proceeded to state, that, on the 1st of February, 1894, he began the serum treatment, in the diphtheria pavilion of the Sick Children's Hospital, Paris. This was the only new feature of the treatment adopted, the nursing of the patients and the local treatment, (glycerine and salicylic acid, lotions of boric acid, etc.), being continued as before. Each day, at his visit to the pavilion, he treated all the children there, no matter what their condition might be, so that the rough general result of each month's treatment may be compared with those of similar months in preceding years. There is also another hospital for sick children at Paris, the Trousseau Hospital, at which serum is not used, with which comparisons may be made.

The percentages of mortality from diphtheria in preceding years were:

1890	55.38
1891	52.55
1892	47.64
1893	48.47
Mean mortality	51.71

From February 1st to July 24th, the serum treatment was applied. Out of 448 children admitted to the pavilion, for diphtheria, there were 109 deaths, showing a mortality of about 24.5 per cent. During the same months of March, April, May and June, 1894, 520 children were treated for diphtheria at the Trousseau Hospital, without serum, and 316 died, showing a mortality of 60 per cent. It will thus be seen, that the epidemic of this year in Paris was severe.

Dr. Roux distinguishes between cases of angina and tracheotomized croup, of which the latter are much more grave. At his hospital the angina cases in 1890, 1891, 1892 and 1893 gave a mean mortality of 33.94 per cent. From February to July, 1894, the mortality was 12 per cent. During the same period at the Trousseau, without serum treatment, it was 32 per cent. The croup patients, who were operated upon, used to give a mean mortality of 73.19 per cent. From February to July the total mortality of that class was 46.2 per cent. During the same period at the Trousseau, without serum treatment, it was 86 per cent.

Dr. Roux remarked, that about a quarter of the children treated at the diphtheria pavilion, did not have real diphtheria, although they had sore throats, and sometimes