seems to be perfectly harmless in any dose whatever, and does not interfere with the function of digestion.

A few years ago my prognosis in a marked case of phthisis, even in the earliest stage, was always very grave. At the present time, I begin the treatment of a case of phthisis, before the expectoration of much pus, with comparatively good hope. Of course, I do not rely upon medicine to the exclusion of those hygienic measures which we all recognize of so much importance. Reports of cases are usually dull reading, and are liable to mislead. I may sometime report a series of cases. At present my only desire is to induce others to give it a fair trial. Several who have used it speak highly of its value, and in a case treated by Dr. Graham, of Dorchester, the Doctor writes me: "Sulphurous acid acts like a specific in her case." I attach great importance to the hygienic management, but I very rarely prescribe cod-liver oil.

Under the use of cod-liver oil patients often gain in weight and appearance, but the physical condition of the lung frequently does not improve. Under sulphurous acid, if there is any change for the better in the symptoms, it is very soon accompanied by a corresponding change in the lung. Of course, I have not been using the remedy very long, and I may have been mistaken in some of the cases I treated for phthisis, but I think not. Intermittent fever, night-sweats, cough, and in several cases severe hæmorrhage, coupled with distinct physical signs of change in the lung structure, are pretty strong indications of tubercular phthisis. At all events, I nave had several cases recover under sulphurous acid in which other standard remedies had failed to give any indication of improvement. Alcohol I never use, unless in the very latest stages, where I often find it a very useful sedative to cough and nervous irritability.

Since writing the above, I was quite interested to hear that in the sulphuric acid works in England phthisical patients often go and offer their services free in order that they may constantly inhale the sulphurous fumes, and that many recoveries have occurred, apparently from this cause.

I hope I have not conveyed the impression that all my cases of early phthisis recover. Having been using the remedy for several years in this dread disease with so much more satisfaction than any other treatment, I was anxious to hear the subject discussed. I conclude:

(1) That sulphurous acid is useful in all cases of typhoid fever.

(2) That, in a certain proportion of cases, it will abort the disease.

(3) That it is the most valuable treatment known in the early stage of phthisis.

(4) If it does not produce some improvement in ten days, it is not likely to do so at all.

In the discussion which followed, it was objected that the sulphurous acid would combine to form sulphates in the mouth or stomach. Sulphuric acid might do so, but sulphurous, in combination with a base, forms sulphites which are believed to be as strongly antiseptic as the acid. Again, allow me to warn those who may be kind enough to give this treatment a trial, that it is very difficult to procure good sulphurous acid, as it oxidizes so rapidly into sulphuric acid. Hence the necessity of personally examining the acid prescribed, and especially of making sure that it has been prepared recently. I have known a very careful man prescribe it in typhoid fever and report it no good, when it transpired that it was only sulphuric acid which he had been using.