that the mortality was materially reduced but the patient seemed to pass more pleasantly through his long illness.

Bouchard twelve years ago adopted the use of charcoal and afterwards he added to this naptholin and iodoform with purgatives every third day (15 grs. mag. sulph.). He found the toxic power of the urine greatly reduced by this treatment and his results from a mortality of 25 per cent. to 7 per cent. This was in 1884.

Twenty-three or four years ago a Dr. Hall of this city, whom I met at the Toronto Dispensary, assured me that he could always abort typhoid fever if taken in the first few days by the exhibition of permanganate of potash. This was my earliest hint on the antiseptic treatment of typhoid.

Dr. J. E. Woodbridge in the United States has worked out a form of treatment being a combination of antiseptics, purgatives and antipyretics for which he claims the power of shortening, modifying and often aborting the disease. Unfortunately this treatment is being advertised by an interested drug firm. It is so complex in its composition that we can not get the proper value of each constituent or the why and the wherefore of the combination.

Our own Canadian Dr. Thistle has done much good work in the eliminative and disinfectant treatment of typhoid. It is to be hoped his researches may continue and that during the term we may hear something more from him on this subject. There are a great many points yet to be cleared up before we can get at a fair knowledge of the value of any line of treatment. The type of disease varies in different years and in different epidemics. In some the duration is much longer than in others and the death-rate higher, and consequently our statistics are at fault.

Bouchard gives 7 per cent. mortality with disinfectants and purgatives. Osler 7.02 per cent. from the Brand treatment. Cotting, of Boston, 10 per cent without medicinal treatment or baths. Dr. Chambers, of St. Mary's Hospital, with the nitro-hydrochloric acid treatment, a mortality of only  $2\frac{1}{2}$  per cent., while in another series his mortality was  $19\frac{1}{2}$  per cent. Dr. Thistle gives the mortality of only 3 per cent.

In these statistics no reference is made to the age of the patients. This may make a difference, especially if the whole number is small, as we all know how seldom children have such complications as perforation or hæmorrhage, accidents which account for a good percentage of deaths in adults—and again we know how much more fatal typhoid is after the prime of life. In reference to the duration of the disease, statistics are misleading, as not only do individual cases differ in duration but