is followed by complete recovery or complete failure, iron in chlorosis will always result in amelioration, even if the tendency to relapse cannot be removed. There are few cases of chlorosis, even those with the lesions of Virchow, that are not benefited by the administration of iron in sufficient quantity. In a great many cases of anæmia, the use of iron would be followed by negative or by bad results.

Discussion.—Dr. WILLIAM OSLER, of Baltimore, took issue with Dr. Henry in regard to chlorosis. He held that chlorosis is absolutely distinct from pernicious anæmia, and for the following reasons: (1) The sex. He had never seen chlorosis in the male. (2) The pathological conditions. He regarded the hyperplasia of the heart and great vessels as a specific anatomical distinction of a certain number of cases. (3) The character of the blood. He considered the diminution of the percentage of hæmaglobin a distinctive feature of chlorosis. (4) Curability. Although in chlorosis there is a tendency to relapse, each given attack can be cured if sufficiently large doses of iron are employed.

Dr. FRANCIS P. KINNICUTT, New York, agreed as to the lack of relation between chlorosis and pernicious anæmia. He had never seen true chlorosis in the male. All his cases of pernicious anæmia on the other hand, with one or two exceptions, had occurred in males. He agreed with Dr. Henry in regard to the relationship between Hodgkins' disease and true leukæmia. He reported a case which came under his observation with typical symptoms of Hodgkins' disease. At this time the proportion of white corpuscles to red was normal. The spleen and liver gradually enlarged, and two years later, at the time of the patient's death, there was one white corpuscle to five or six red.

Dr. W. W. JOHNSTON, Washington, thought that a study of certain anæmias which are met with in women will throw light upon the association of anæmia with diseases of the intestinal glands and gastric tubules. The explanation of the chronic anæmias of parturition is probably the continual pressure upon the intestinal tube, causing a long starvation lasting nearly a year. This seems to produce an actual organic change in the intestinal glands. Several illustrative cases were cited.