

for the treatment and prevention of the prevailing "pneumonia." The results of this mass inoculation will be available shortly for publication, but at the present juncture it is not possible to say more than that the results have been most satisfactory and significant and go far to support the attitude taken up in this paper in regard to the etiology of pneumonia and other respiratory infections.

It appeared necessary to introduce this subject in this way in order that it may be appreciated that although no statistical evidence will now be produced, these conclusions have a definite experimental and experimental basis, which will be elaborated in a later publication.

METHOD OF INVESTIGATION.

It is not intended to minimize the importance of the recognition of the various antibodies which have been identified and described from time to time during the last twenty years. It is by such means that we are able to appreciate something of the struggle which goes on between pathogenic micro-organisms and the body, and the nature of the various immunological processes called into play. In recent years the extraordinarily interesting phenomenon which has been named "Anaphylaxis" has attracted considerable attention. Much remains to be learned in regard to this most important factor in immunity problems, and it would appear that a closer study of anaphylaxis as applied to the employment of vaccines and sera for the treatment and prevention of infective diseases, will supply the missing link in the chain of evidence required for a more complete understanding of what takes place when these therapeutic agents are employed. Since Richet's pioneer work, an outstanding publication, is Beeredka's "Anaphylaxie et Antianaphylaxie." Beeredka shows that the danger of anaphylactic shock in a sensitized individual can be prevented by the administration by various routes, of small doses of the particular serum applicable. Such a protective injection he names the "anti-anaphylactic" injection. It is necessary to emphasize the importance of these phenomena here, as the writer is firmly convinced that these factors play a very important part in vaccine and serum therapy, especially in therapeutic inoculation. In no group of diseases are anaphylactic phenomena more evident and important than in the group of respiratory diseases under consideration. No satisfactory explanation can otherwise be offered of the fact that an injection of mixed vaccine of moderate strength, such as is commonly used for prophylactic inoculation against respiratory catarrhs, when inoculated into an individual comparatively free of catarrh produce very little local reaction and practically no general reaction; if the same dose be inoculated in the same individual in the presence of an acute respiratory "cold" or catarrh, the local and general