

tough and resistant. If the applications of the iodine are made in the earliest stage of the process you may count on aborting the boil; and in those subject to furunculosis every little inflammatory follicular papule should be regarded as a possible boil and treated accordingly. When the patient comes to us with a furuncle beyond its early stage, abortive treatment is useless, and we must direct our efforts toward relieving pain, shortening the normal duration of the boil and preventing further infection through the careless spread of infection matter over the surface by means of the fingers, the clothing, etc. I could fill the hour with a recital of the various methods of treatment that have been recommended for the accomplishment of these indications, but I propose to limit myself to an account of the method which I have found most efficient and most agreeable to the patient. Let me say at once that I do not incise a boil. A good incision, it is true, by relieving the tension of the epidermis, relieves the pain. But it accomplishes this at the expense of a great deal of pain to the patient, and beyond this it accomplishes nothing. The same end can be obtained by more agreeable methods. In the first place, the patient should receive at once a hypodermatic injection of about 400 million dead staphylococci, that is, the so-called vaccine of furunculosis than which theoretically the autogenous vaccines would be more efficient. We cannot wait for the bacteriologist to prepare a vaccine for each case, and as a matter of fact I have found the stock furunculosis vaccines to be obtained at every druggist's to be sufficiently effective. You know from our previous talks that I personally am not very much impressed with the value of the vaccine treatment of diseases in general. For most infectious diseases I think vaccines quite useless. But of their effect in furunculosis, one who is familiar with the normal course of a boil cannot fail to be convinced. A large, hard, painful, throbbing boil, say on its third or fourth day, will within twenty-four hours of the vaccine injection be softened down, the infiltration manifestly subsided, the pain greatly diminished or gone, and the discharge of a thin pus indicates the stimulation of the autolytic process which goes on till the central necrotic mass itself is liquefied and the boil heals without the discharge of a core. This, gentlemen, is the rule with well-advanced boils. Sometimes even in this stage the boil is aborted by an injection, the pain and inflammation subside, the infiltration slowly is absorbed and the boil disappears without breaking down and discharge. In the earlier stage of the infection the vaccine injection aids obviously in aborting the boil. In any event the vaccine treatment is indicated as a means