

KOCH'S TREATMENT OF TUBERCULOSIS IN MONTREAL.

The authorities of McGill University having been favored with a supply of Koch's lymph, experiments were at once instituted in the wards of the Montreal General Hospital by Drs. Roddick, Shepherd, Bell and MacDonnell. For the following report of these experiments we are indebted to Dr. Robt. E. McKechnie, House Surgeon:—

CASE I.—Mrs. P., an old woman, has had facial lupus for eight or ten years. The diseased area has been scraped and cauterized at different times, temporarily arresting but not curing the disease. At present, the diseased area is as large as the palm of the hand, covering the left temporal, malar and upper part of buccal regions, also involving the outer canthus of the eye, with the outer half of the lids.

Dec 19th.—At 10.45 A.M. $\frac{1}{10}$ ccm. of a 1 per cent. solution of Koch's lymph was injected below her right scapula. She was then put to bed; hourly temperatures to be taken. At 3 P.M. a blush appeared on bridge of nose and on left cheek. This began to fade at 5 P.M., but did not entirely disappear, as a faint blush persisted over the left lower jaw. Patient experienced no chill and no elevation of temperature.

D. c. 20th.—At 10.30 A.M. $\frac{2}{10}$ ccm. of the same solution was injected. Temperature began a definite rise at 4 P.M., reaching the maximum of $102\frac{1}{2}^{\circ}$ at midnight. There was no chill, nor was nausea or headache experienced. Patient wore a dull heavy expression all day. At 3 P.M. a blush appeared below the diseased area, over lower jaw; while at 4 P.M., coincidently with the beginning of increased temperature, the affected tissues became decidedly redder in color, but showed no tendency to necrotic change. This redness died away during the night. At 11 P.M. the patient was feeling heavy, but not sick; and her pulse very irregular in volume.

Dec. 21st.—At 10.40 A.M. $\frac{1}{10}$ ccm. of same dilution of the lymph was injected. The same local changes followed this injection, but were not as intense, and the highest temperature reached was $100\frac{1}{2}^{\circ}$ at 8 P.M.

Dec. 22nd.—At 10.50 A.M. $\frac{1}{10}$ ccm. of the same dilution was injected. Temperature began to rise at 4 P.M., reaching $102\frac{1}{2}^{\circ}$ at midnight, steadily declining after that. Patient was very dull all day and inclined to sleep; also felt sick at her stomach. Locally the changes were as before, but it is now noticed that there is a tendency to elevation of the diseased patch by formation of crusts of dried secretion. This is especially noticed about the outer half of the affected eyelids, where the crusts are about $\frac{1}{2}$ -inch in thickness.

Dec. 23rd.—Patient was not injected to-day as temperature was still above normal. She was drowsy all day, with no appetite; but as