

CURRENT MEDICAL LITERATURE

SERUM DOSAGE IN DIPHTHERIA.

Dr. Joseph Comby (*Presse Medicale*) issues a warning against hesitation and delay in the treatment of diphtheria by antitoxin. Often, in insidious forms of the disease, the child has already been ill three to five days before the physician's initial visit, and even then the physician will frequently withhold specific treatment another day while awaiting a positive bacteriologic diagnosis. In severe cases the amount of antitoxin administered is often unwarrantably small, through apprehension of anaphylactic manifestations. The ratio of cases with such manifestations in Comby's experience has been but fifteen per cent., but even if this ratio were exceeded, the resulting erythema, urticaria, arthralgia, or fever are trifling and ephemeral, and death from this reaction never occurs. A mere suspicion of diphtheria indicates immediate serum injection, without waiting for the results of the bacteriologic examination. Even in subjects who have previously received serum, a large dose—never less than twenty mls of the French official antitoxin, should be given at the start. In severe or tardily treated cases, the dose should be from forty to 100 mls, to be repeated within twenty-four hours if necessary. A child of three years, seen on the fourth day, received 120 mls in thirty-six hours, and a girl of fifteen, 600 mls in the course of a few days. Under such doses the throat and nasal fossae rapidly clear and apparently hopeless cases recover. Serum reactions seem less frequent and marked after large than after small doses. Large doses, moreover, are therapeutically all sufficient, rendering throat irrigations and applications, with the attending discomforts in small patients, quite superfluous.

TINCTURE OF IODINE IN ERYSIPELAS.

Dr. William Keppler (*The Medical Clinic*) considers a ten per cent. strength of tincture of iodine, vigorously painted over the affected area and surrounding tissue, an efficacious remedy in the treatment of this affection. He emphasizes the importance of its application in equal strength to all of the affected area including the folds, wrinkles and recesses. Where the diseased part is smooth and of easy access the preparation is applied by means of a tampon of iodized gauze, a second application being made at once after the one has dried. The iodization must extend beyond the part implicated by at least a hand's width, to insure successful results. Direct application of the tincture to the affected