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THE TREATMENT OF TYPHOID FEVER.

We draw the attention of our readers to the discussion on the Treatment of Typhoid Fever at a recent meeting of the Montreal Medico-Chirurgical Society, a resume of which appears in the present issue of the Journal. The very large attendance, and the evident interest taken, both by the minority who spoke, and the majority who listened, fully justified the choice of a topic on which the last word seems destined never to be said. The surgical questions involved were clearly and forcibly presented, a plea being specially made for early diagnosis of perforation, and prompt surgical interference in such conditions, in view of the more recent favorable statistics bearing on the operative treatment of that formidable complication. While the discussion, which ensued, showed no dissent from the conclusions regarding the necessity of early diagnosis and operation, there was not the same unanimity about the most reliable subjective and objective signs of perforation, the surgeons, probably influenced by their experience with appendicular disease, laying most stress on the occurrence of sudden abdominal pain, while the physicians were inclined to attach more weight to the associated constitutional disturbance, and particularly the signs of collapse. Certainly the surgeon is quite right in asking that whenever perforation is even suspected he should have the opportunity of consulting with the physician in charge. Too often, he claims, he is called upon to operate when general peritonitis has set in, and the outlook is the worst possible. At the same time one must admit that it is a most delicate point to decide when it is advisable to resort to the knife, and when to stay one's hand, for it can hardly be denied that an exploratory operation is not to be lightly undertaken in the case of a subject already exhausted by a serious disease. The discussion of the medical treatment of typhoid fever evoked, as was to be expected, a wide divergence of opinion, notwithstanding the very convincing arguments and statistics brought forward by the opener of the discussion in favor of systematic hydrotherapy. It is to be regretted that some ardent advocate of the so-called antiseptic and eliminative treatment was not present to urge the claims of this, the most recent, and in some quarters, highly popular, method. As it was, the ancient expectant plan was the only one that found supporters among those who, for one reason or another, condemned the bath treatment, as either barbarous or unnecessary. Really it is too late in the day to advocate a return to methods, which, even under the most favorable conditions, resulted in a mortality ranging from eleven to seventeen per cent. It would be