

The day may come when we will be able to understand and treat intelligently the direct cause of most diseases. Already, through the labours of the bacteriologist, the dawn of that bright day has begun to appear, and is giving intelligence and direction to our therapeutics. Many do not believe that we can influence the course of disease by the administration of remedies whose action is to destroy the vitality of bacteria multiplying in the blood. It is the object of this paper to show that, at all events, such treatment is worthy of our careful consideration in typhoid fever and in the early stage of phthisis.

The antiseptic properties of sulphurous acid have been recognized since the earliest times. Homer speaks of its having been used to fumigate a house. In modern times, Prof. Polli, of Milan, and Dr. Dewar, of Scotland, have laboured to bring its value in the treatment of disease to the attention of the profession. Shortly after beginning the practice of my profession, I read an article in Braithwait's retrospect extolling it as almost specific in the cases of typhoid which had fallen under the care of the writer. Having used it almost ever since with what seemed to me a very small proportion of fatalities, I thought I might be allowed to refresh your minds on the subject.

In speaking of typhoid fever, I may say that I do not believe that all the cases we call by that name are the product of one cause. Dr. J. E. Graham, of Toronto, expressed the same opinion some years ago. I believe that some are due to the rapid multiplication of bacteria in the blood, others are merely cases of continued malarial fever, whilst a third class are due to the inhibition of poisonous ptomaines.

The first class may be contagious, the two latter never. The first also rapidly yields to active antiseptic measures, the two latter, while being somewhat improved, do not yield to such treatment. On one occasion I attended a lady who had been nursing her brother in typhoid fever. She presented all the symptoms of the disease, yet, under the use of large doses of sulphurous acid, she was able to sit up in a week. This I regard as an example of the first class. On another occasion I attended a family poisoned by eating canned salmon. If I had not been able definitely to discover the cause, I would have called some of these typhoid, they ran a course so similar to that disease. This I look upon as ptomaine poisoning. We have all had cases subject to repeated attacks of malaria, which finally were attacked with a continued fever in many respects similar to typhoid, which left the patient cured of his malarial attacks.

In order to get good results, sulphurous acid must be fresh and administered as freely as the patient will take it, and it must be given early in the disease.

I am in the habit of giving from 3ss to ʒi every two hours, and, in some cases, for a time at first, I give ʒi every hour if the patient will take it. I regret that I can give no record of the number of cases treated in this way, but I know that I am within the mark when I say that the death-rate has not been more than one per cent., and this in spite of the fact that I never administered any form of alcohol, even during the crisis. I am not, by any means, recommending the acid as a cure-all in typhoid, for I am well aware that much depends on the general management, but I do say that I am certain I have found it far superior to any other treatment I have ever used.

In the treatment of the early stage of phthisis, also, I believe that it will be found almost, if not quite, as satisfactory as in the treatment of typhoid. Here, also, it must be administered early in the disease, and in as large doses as the patient will take. It