THE CANADA LANCET.

growing worse steadily. Her voice was changed and she constantly spit up muco-pus and there was considerable nasal discharge. I put this patient on a solution composed of one ounce of Glyco-Thymoline and two ounces of distilled water. She douched her nose and sprayed her throat with this solution every three hours. I put her on a preparation of iron, as she had a mild degree of anemia. On this treatment, which my patient persisted in for two months, there was a steady progress toward recovery, which was complete by the end of the third month. This patient conformed to my instructions regarding hygienic measures.

Mr. A. J., a traveling salesman, came to me for treatment of nasopharyngeal catarrh. He had grown steadily worse since the cold weather began and this disease he said was a constant source of annoyance to him. I thought his degree of emaciation and anemia called for cod liver oil, and I accordingly gave him a good preparation of it. He was given Glyco-Thymoline in the strength used for the former patient. This relieved the dryness and pain in his throat and nose in a day or so, and he began to improve in every way. I was able to discharge this patient eured in six weeks after commencing with him.

Miss S. had nasopharyngeal eatarrh, which was very aggrevating to her and which, as is the case with most of these patients, was gradually growing worse. She was given no internal treatment, as there was, in my estimation, no demand for any. On local treatment Glyco-Thymoline in the strength of one to three of distilled water brought about a complete cure in about eight weeks.—*Therapeutic Record*, Feb. 15, 1910.

THE VACATION DANGER.

It has often been advanced as the reason for the seasonal prevalence of typhoid fever in the cities during the Autumn months that among the home-coming throngs many are in the incubation period of the disease, contracted at unsanitary country houses, farms and vacation resorts. In any event, September, October, and November seem to be the months in which the disease is most rife. The prolonged course of typhoid and the milk diet necessary during the febrile period are usually responsible for a considerable loss of flesh and strength, and the patient is therefore almost always pretty well devitalized at the beginning of convalescence. In conjunction with liberal feeding, Pepto-Mangan (Gude) is of distinct value as a general tonic and reconstructor, during the convalescent period, and may be safely commenced early, as it is entirely free from irritant properties and does not disturb the digestion nor cause constipation.

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