

of my experience, I have come to regard as worthy of some confidence.

From a therapeutic point of view, it may be stated broadly that the treatment of a case of enteric fever will probably be conducted on one of two well-recognized lines—an active remedial method, or a passive, or so-called expectant, method, each of which has its firm adherents. But whether we favor the exhibition of remedies having for their object a direct interference with the natural course of the disease or whether, as is so much the fashion to-day, we adopt an expectant attitude and are content to restrict our efforts to combatting individual symptoms in the event of their assuming a threatening aspect, and to relieving any complications which may arise during the course of the illness, the fact must never be forgotten that the treatment of enteric fever is not merely a matter of therapeutics, but implies the general management of the case.

Now, it may be asserted generally that our management of any case of serious illness is likely to be successful in proportion as it is adapted to the special circumstances which characterize that attack, due regard being given not only to the underlying morbid process, of which certain of the symptoms are the recognized expression, but also to the personal factor which in some instances contributes so largely to the general aspect of the case; and to this rule enteric fever is no exception. Experience clearly indicates that what is best for one patient may not necessarily be so for another, and that the best results will be achieved, not by a slavish adherence to any particular method of treatment, to the exclusion of others, but by the adoption of such measures as seem best adapted to the idiosyncrasy of the individual patient and the particular type of his attack.

The methods of treating enteric fever by means of remedies which are assumed to be capable of exerting a direct controlling influence over the natural course of the disease may be appropriately referred to as either (1) specific, (2) antipyretic, or (3) antiseptic, according to their conception and to the nature of the agents employed, and they may conveniently be discussed under these headings.

1. First, as to specific treatment. The remarkable success which has attended the treatment of diphtheria by the injection of antitoxic serum, and in less degree that of tetanus, not unnaturally encouraged the hope that a curative serum might be prepared which would prove equally efficacious in the case of typhoid fever. But, unfortunately, such favorable anticipations have not been realized. In the case of the two former diseases,