

In considering the above results, three points of interest appear:

1. Bacilli resembling the diphtheria bacillus in morphology were found on admission in the throats of only 1.2 per cent. of our cases.

2. Only a minority of these cases presented clinical evidence of diphtheria.

3. The presence of Hoffman's bacillus in the fauces did not appear to play any part in the causation of diphtheria.

We will now pass to the consideration of the second question which we propounded—namely, how far it is possible to prevent post-scarlatinal diphtheria by the method adopted. For this purpose we will tabulate the annual admissions into the London Fever Hospital of cases of scarlet fever and also of diphtheria during the last six years, showing the incidence of post-scarlatinal diphtheria in each period. A larger number of cases appear in this table than we have hitherto mentioned. This is due to the inclusion in it of Dr. Sidney Phillips' cases, which were in the same wards, and were isolated in the same way as ours when showing suspicious cultivations. We are indebted to the kindness of Dr. Sidney Phillips for permission to refer to and include his cases. We add, for comparison with our figures, similar data extracted from the reports of the Metropolitan Asylums Board:

THE LONDON FEVER HOSPITAL.

Year.	Scarlet Fever Admissions.	Diphtheria Admissions.	Post-scarlatinal Diphtheria.
1893	704	5	4 = 0.52 per cent..
1894	294	25	1 = 0.34 "
1895	516	52	14 = 2.71 "
1896	637	65*	3 = 0.47 "
1897	431	45	1 = 0.23 "
1898	325	40	0 = 0 —

* All admitted after the month of March.

THE METROPOLITAN ASYLUMS BOARD.

Year.	Scarlet Fever Admissions.	Diphtheria Admissions.	Post-scarlatinal Diphtheria.
1893	14,548	2,348	204 = 1.40 per cent.
1894	11,508	3,600	220 = 1.90 "
1895	11,271	3,635	408 = 3.02 "
1896	15,176	4,508	705 = 4.04 "
1897	15,241	5,673	796 = 5.22 "
1898	Statistics not yet published.	—	—