

tissue waste suggests the advisability of *rest in bed* with *abundant proper nutrition*. The degree of rest varies in different patients and in the same patient from time to time, and ranges from absolute rest to a mere restriction of activities. Mental rest is essential as well as physical. In some cases the mental rest is the essential, whereas considerable physical activity may be allowed. The individual merits of the case must be the sole guide. The diet must be abundant, nutritious and adapted to your patient, as some patients in this disease show a marked selection in diet with reference to its digestibility. Generally speaking a meal diet I would interdict, a small amount of white meat and fish may be allowed. Milk should be taken freely and form the basis of a very variable diet. Baths of various sorts and kinds have been suggested and used by some with but little effect. Electricity has been employed, the galvanic, faradic and static current, and still exophthalmic goitre exists. The medicinal treatment of this disease occupies a wide range and includes nearly all the drugs in the pharmacopœa. *Calomel, say once a week with a saline (say phosphate of soda), each morning facilitates elimination and I am sure does good. Iron and arsenic in anæmic cases are indicated.* Outside of these mentioned are the cardiac vascular tonics, digitalis, strophanthus, convallaria, the nervæ sedatives, the bromides, and others, such as quinine. The salicylates, antepyrin, phenaceline, etc. These may be indicated at some time during the course of the disease. They are only used to meet special conditions, and depend for their use largely on the skill and judgment of the administrator. The glandular extracts, the thymus, the suprarenals, the thyroid, etc., are and have been in use for some time. In regard to all of them one finds favorable reports. In acute thyroidism the administration of the thyroid gland is positively harmful. Cases, however, are cited where the symptoms of Graves and a myxodomatous condition coexist in the same patient. A transitory stage, as it were, and it is here that I believe the administration of the desiccated thyroid would do good. Solution of adrenalin does good in relieving tachycardia to some extent.

Surgical.

Barker makes the statement that in our present state of knowledge and practice that once a positive diagnosis of exophthalmic goitre has been made operative procedure is indicated.

Kocher, Sen., of Berne, has operated for goitre 3,460 times up to date (October 1st, 1907). Of these, 315 have been on 254 patients afflicted with the exophthalmic disease. This is a wealth of experience which enables a man to speak. Of the 254 patients operated on for Graves's disease there were nine deaths. Of the last 91 operations on 63