

treatment of the following cases that may be of interest to other members of the profession.

On September 7th, 1898, I was called in to see four members of a family who were suffering from "sore throat." The history given was that on August 30, B. H., a girl, aged 20, contracted sore throat severe enough to confine her to the house, but she did not take to bed until September 1st. Two days later her nose became very sore so that she thought she had "a cold in the head" and her right ear became very painful, being accompanied by considerable deafness. When first seen on September 7th, there were ragged patches of false membrane on each tonsil and also on the uvula. The anterior walls were swollen and sore, the glands at the angle of the jaw swollen and tender, and an examination of the urine showed a considerable quantity of albumen present. One thousand units of Anti Diphtheritic Serum were injected and a spray of corrosive sublimate 1-5000 ordered for the nose and throat every two hours. In twenty-four hours the sense of smell had returned, the deafness had largely disappeared, the amount of albumen was markedly lessened and the patient felt decidedly better. Twenty-four hours later, or forty-eight hours after the injection was given, the urine was almost free from albumen, the remains of the membrane had disappeared and the patient felt almost well but weak and still looked very pale.

On September 5th, seven days after the development of the above case, the mother, sister and brother in the same family became affected and it was this fact that aroused suspicion and caused them to seek medical aid.

P. H., aged fourteen, was the worst case. The membrane covered both tonsils and had crept over each side of the soft palate and uvula. The surface beneath bled readily on removing the membrane. The glands at the angle of the jaw were much swollen and very tender, pulse 120 and temperature $102\frac{1}{2}$. One thousand units of serum were injected and the spray ordered to be used locally. Twenty-four hours later the membrane had covered the entire uvula and extended into the pharynx so that the patient could scarcely swallow and the temperature had risen to $103\frac{1}{2}$. I injected a second dose of 1,000 units which checked any further advance, the membrane soon began to separate and was completely gone four days later.

A. H., a boy of seven, had a patch on each tonsil rather larger than a ten cent piece when first seen, slight glandular involvement and a temperature of 102. Five hundred units were injected, this being all I had at the time. It proved sufficient to check the progress of the disease, however, and he made a rapid recovery.