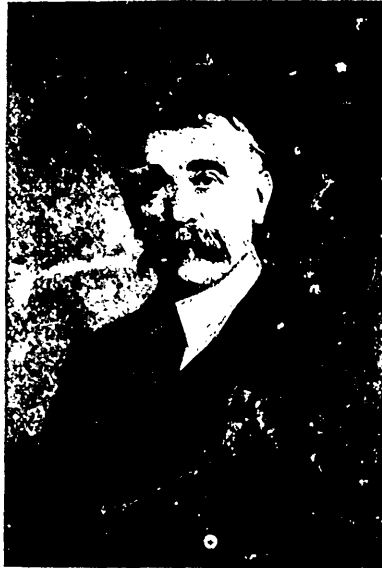


the hyperpyrexia of this disease, just as quinine fails in exceptional cases to control malaria. Wolfberg and Zimmerman are nevertheless not inclined to concede any decided antipyretic effect to the salicylic acid group. Justi holds that the fall of temperature induced does not reach its maximum for five or six hours after administration. Hare, from personal studies, surmises that salicylic acid lowers fever by diminishing heat production and by increasing heat dissipation. If it be conceded, however, that the acid plays its chief rôle as an antipyretic in the fever of acute rheumatism, why may its action not be ex-



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plained on the theory that it antidotes the toxin, or *materies morbi*, which in the first place is the exciting cause of the fever?

Salicylism.—In addition to the various untoward symptoms noted under the physiological effects of salicylic acid, there may be added: extreme gastric irritability and vomiting, headache, amblyopia, dilated pupils, feeble, shallow breathing, dyspnea, albuminuria and hematuria, decubitis, visceral congestions, and local necroses. Its prolonged use, even in therapeutic doses, is apt to cause marked anemia, and larger dosage may cause destruction of the corpuscles. Binz is of opinion that it is an abor-