

The first tuberculine was proven dangerous on account of its liability to give rise to renewed activity in cases of quiescent tuberculosis and on account of the dangerous symptoms following its introduction to the system. It causes fever, malais, headache, pain in the limbs, nausea and vomiting.

The second tuberculine while it does not give use to these symptoms has not met with general favor. It has proved efficient in cases which are early detected and according to some British writers has given very satisfactory results. What future researches can bring forth in this direction remains to be seen.

Iodine, carbolic acid, corrosive sublimate and iodoform all have had their advocates, have been used at various times, in one form or another but have now practically fallen into disuse. The injection of iodoform emulsion into tuberculous joints is still highly recommended, but the discussion of this process belongs to the domain of surgery.

Formaline is strongly recommended for its germicidal action on the Tubercle Bacillus and the inhalation of a 40 % aqueous solution of Formaldehyde gas has strong advocates. Landerer of Stuttgart recommends the injection either subcutaneously or intravenous of cinnamic acid. The claim for this drug is that it brings about a process of encapsulation and thus prevents the degenerative and softening process of the tubercle. A leucocytosis or aseptic inflammation is set up in the neighborhood of the tuberculous nodules and a wall of lymph is created around each tuberculous mass, hence invasion of new tissue is prevented.

Of specific drugs there is no doubt but that creosote takes the lead. It has proven a decidedly useful drug. It is claimed for creosote that it relieves the cough, diminishes expectoration, lowers the fever, checks night sweats, improves the appetite and digestion and diminishes the tendency to diarrhœa. The carbonate of creosote is an agreeable preparation, or better still some of the many preparations of creosote wine and cod liver oil. It is best administered shortly after meals. Certainly this is a most useful drug and should in all cases be given a fair trial. The only drawback I have observed to the use of creosote is its effects on the digestive system. In some of the more recent combinations this difficulty is overcome. But it is a question if thus given the full value of the drug is obtained. I doubt it very much.