

caprice of things, but men like these do the noblest work of God." Read "The Bonnie Brier Bush" and you will find we have in our midst many men like Dr. MacLure, who honor our profession as it honors them, and the greater its progress and distinction the more the pseudo-cults multiply and want to be *Doctors* and *Physicians*—a disgrace to M.D.'s and to our universities and intelligence. Save us from medical Huns, who want legislation, recognition and license! "Confound their knavish tricks!"—*Medicus*.

DIPHTHERIA AND THE SO-CALLED SCHICK REACTION

(*Therapeutic Gazette.*)

It has been known to active clinicians and laboratory workers for quite a long period of time, that certain persons who receive the micro-organisms of diphtheria speedily develop that malady in varying forms of virulence. On the other hand a by no means small number of persons are able not only to receive but to carry about in the pharynx, in the tonsils, or in the post-nasal spaces, a multitude of these specific micro-organisms without at any time suffering from the slightest degree of discomfort and illness, being at all times unconscious of their infection. These individuals are, however, quite as capable of spreading the disease as are those who have definite clinical manifestations with a false membrane present. These so-called immune persons are doubtless responsible for the development of diphtheria in cases in which all of the ordinary methods of infection seem to have been excluded. Such facts have, at first sight, little bearing upon the problems which confront the active practitioner, who naturally is not called upon to see the diphtheria carrier who has no symptoms and so has no opportunity of attacking the disease in its primary focus. The only way in which he can actively control the spread of diphtheria by such carriers is to insist upon all persons who have been exposed to this disease receiving antitoxin or being locally treated in such a way that the focus of infection is removed. In other words, when an individual has been in charge of or is nursing a case of diphtheria, yet presents no evidences of the disease, the proper thing to do is to investigate the case to find if the nurse's throat is negative as to infection, and if not to see that it is made negative.

Another reason why certain patients develop diphtheria while others equally exposed escape, lies in the fact that one individual contains in his body a considerable amount of antitoxin, whereas