child should be closely inquired into, as those who are weak are often affected adversely by antitoxin. In February last I was called by a farmer some 10 miles from my home about 9 o'clock one night and was told to bring antitoxin enough for himself, his wife and six children, as they had been exposed to the infection of diphtheria that day. I went, and gave all a dose ranging from 300 units to baby eleven months old. to 1,500 units in the father and mother. One girl of 11 years, about twenty minutes after receiving 500 units, while watching me give another its dose, fell headlong to the floor unconscious, striking her head hard on the bare floor. She was picked up and placed on a couch, the mother assuring me that she often fainted; but she did not come out of it for some time, and I got very anxious. She was given hypodermically two 1-40 gr. of nitrate of strychnine, and after half an hour gradually came to. She was then put to bed and by morning was nearly herself again. I finished giving the serum to the rest, at the request of the parents, and had no further trouble and no infection. It is not within the scope of this paper or the time allotted to me to discuss intubation. tracheotomy, post-diptheritic paralysis or any of the after-effects if complications.

In any case, the early use in the disease of a sufficient dose of antitoxin, these are very rarely or never seen.

I have to gratefully acknowledge my thanks for help to the officials of the Provincial Laboratory, to Dr. Whyte, of the Toronto General Hospital; to Mr. Wm. Grant, of Parke, Davis & Co., who kindly loaned me some literature, and to my own little library's various text-books.

THE NEW SERUM TREATMENT FOR EPILEPSY.

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WHEN discussing the treatment of epilepsy, our first thought is directed toward the large, the formidable array of remedies which have been lauded, used, abused and discarded in the treatment of this malady. Thinking of epilepsy, the general practitioner has in mind the awful chronic disease, considered incurable, the occurrence of which in his practice makes it incumbent upon him to disclose to the interested parties that his medical skill has encountered a foe which he cannot hope to successfully cope with.

Having thus done his duty, the family physician will often see the patient return to him with the request for such aleviation as he, under the circumstances, may obtain. At such time it is a patient who has