the central part which was eventually cast off in the form of a slough. For some days before a visitation the patient complained of an intense heat over the whole body. He was dull and indisposed to any exertion. This condition alternated with severe headaches. He was always, but especially at this period troubled with constipation. Other than the above the patient appeared to enjoy fair health As regards urinalysis, of which a number were made, there was nothing abnormal excepting on one occasion when pus was found. The blood was also examined, and found to be in a normal condition.

The patient had been steadily under treatment for two years before coming to me. I learned from a prescription he showed me, that he had been taking iodide of potash and bichloride of mercury. Suspecting syphilis I again went into his history carefully but could find no trace. I put him on arsenic, strychnine and calcium sulphide. He was ordered to take a bath every night followed by a sponging over the whole body with carbolic acid (1 in 60). Under clothes were changed frequently. Calomel in 4 gr doses followed by salines every 5 days was also ordered. After one week patient was feeling better and boils had nearly all disappeared. Ten days later, however, he was much in the same condition as he was when I saw him first. The hand was even more swollen and painful. Hereupon I made a culture on blood serum from the pus of one of the abcesses that had not yet been exposed. lated another tube of blood serum with a specimen of the blood. 24 hours in the thermostat a very free growth was present in both tubes. Cover-glass preparations of the specimen taken from the culture inoculated with the pus showed a mixed growth viz:-staphylococcus pyogenes aureus and a bacillus, to be aftewards described. The culture from the blood showed the same bacillus and a few cocci. In like manner another specimen of blood was examined revealing in an apparently pure state the same bacillus as was present in the last specimen I referred the matter to Dr. H. B. Anderson and he advised more strict bacteriological technique, stating that it was possible that the organism found was a contamination. A good hypodermic syringe was selected and allowed to remain in a solution of carbolic acid (1 in 10) for ten minutes after which it was boiled in a strong solution o bicarbonate of soda for 45 minutes. The patient's forearm was washed with soap and water then sterilized with carbolic solution (1 in 20) and finally with ether and alcohol. I thoroughly washed my own hands and sterilized them in carbolic acid (1 in 20). withdrawn by means of the prepared hypodermic syringe from the median basilic vein and injected into liquitied agar and plated at once. After 24 hours in the incubator there were innumerable colonies, of different shapes and sizes, viz:—round, branched and beaded, and on the level or above the -urface of the media. Ten different colonies, taking as many different forms and as far remove I from each other as possible were examined, revealing in each case the same micro-organism. under every precaution I inoculated slant blood serum with blood in Again and the following order 2 from 1, 3 from 2 and so on to 4. Each time more liquification occurred. No. 1 showed a brownish purulent scum, No. 2 slightly liquified and No. 4 thoroughly liquified holding in suspension a