

with some other disease causing discharge, gets well spontaneously after a time, whether treated or not, and leaves behind no malformations or sequelæ. It should be treated in the simplest possible way, since this yields results, slow but satisfactory. The use of strong caustics is inadvisable and often distinctly harmful. Operative treatment does not lessen the supposed danger of contagion, but rather increases it; does not guarantee against recurrence, nor render unnecessary the routine of local applications, and very often causes permanent deformities in the lids which are worse than the results in the untreated disease. I append a number of formulæ which I have been in the habit of using from time to time.

Zinc Sulph, Grs. 1.

Vin. Opii, M. 10.

Aq. q.s. Oz. $\frac{1}{2}$.

M. sig.: One drop in each eye t.i.d.

Tr. Iod,

Glycerin,

M. Sig.: Apply once a day to everted lids with a swab.

Cupri. citr., Grs. 6.

Petrolat. Oz. $\frac{1}{2}$.

M. Sig.: Use in the eye night and morning.

* TREATMENT OF TYPHOID FEVER

By J. C. BLACK, M.D., C.M., Regina, Canada

To understand the treatment of a disease it is essential to understand something of its etiology, pathology and nature of the germ causing the disease.

Typhoid fever is a general infection with characteristic lesions of the intestines due to a specific bacillus (Stergel). Certain predisposing features make individuals more liable at one time than another to this disease. It occurs in adolescence and the young, but rarely in the old. It is a disease of the temperate zones and is more abundant in the autumn. Drainage and other

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