

of the spores in the two varieties were measured by making a permanent specimen of an undoubted case of each and using this for purposes of comparison. Of the twenty cases, thirteen, or 65 per cent., were classed as *microsporon Audouini*; four, or 20 per cent., as *trichophyton megalosporon endothrix*, and the remainder, 15 per cent., could not be determined. This proportion of the two varieties corresponds very nearly to the results obtained by the examination of cases in the Montreal General Hospital. The large majority of our cases are due to the small-spore form.

The method of treatment adopted was as follows: After thoroughly cleansing the scalp with water and green soap, the hair is carefully dried and oil of turpentine rubbed in, and immediately after, while the turpentine is still wet, tincture, or liniment, of iodine is painted on. In the course of a few days a somewhat thick, dark brown, iodine-stained scale forms over the part, and it is necessary to remove this to carry on the treatment successfully. After considerable experience with various oils and soaps, I found that ordinary vaseline was the most effectual solvent here, as it is also in other scaly conditions of the scalp. Sometimes, in old, neglected cases, it is necessary to soak the hair over night with the vaseline, but even in these no difficulty is encountered in washing off the scales along with the vaseline in the morning. After removing the scales the turpentine and iodine is re-applied until such time as it is thought that the fungus may be destroyed. Then, after cleansing the scalp again, no further application is made if the broken hairs and other evidences of the disease have disappeared. The former site of the disease is carefully watched for some weeks, and, on the first appearance of scaliness or broken hairs, a second course of treatment similar to the first is carried out. The use of the microscope in detecting the very earliest reappearance of the fungus is imperative.

The frequency with which these applications could be made depended entirely upon the tolerance of the patient. In some of this series of cases a daily application was carried out for weeks without causing any discomfort, but in others the head rapidly became sore, and a soothing ointment or carbolic oil (1 to 40) had to be substituted until it was safe to go on again. In two of the series the treatment produced a pustular folliculitis; in two it caused no irritation; in the rest, after a longer or shorter interval, it had to be discontinued for a time. The curative agent in the treatment appears to be the turpentine. This was shown by a mistake made by one of the nurses, who misunderstood the directions and used only the iodine. The cases under her charge made no progress at all, and, not understanding the