

If it is a fact that in diphtheria there is a characteristic secondary rise of temperature in a large percentage of the cases about the end of the first week of the disease, it will prove helpful in those cases of angina in which one is unable definitely to say that diphtheria does or does not exist, and when a bacteriological examination of the discharges cannot be obtained.

As mentioned above three out of the four cases whose secondary fever was high, died of "heart failure."

Just a word on the premonitory symptoms of that most terrible of all complications of this deadly disease.

In many cases death is so sudden as to preclude the possibility of premonitions, or supervenes so rapidly after their appearance that no time is given for action; but, in a very large proportion of the cases, there are distinct premonitory signs, which give us sufficient warning and time to endeavor to afford relief and to call the friends and prepare them for the almost inevitable sad result.

The combination of events to which we wish to direct attention is *an acute pain in the epigastric region combined with vomiting* and a feeble pulse. So general is this combination, that the nurses in charge of diphtheria wards have learned to regard such cases as almost necessarily fatal.

Of several cases we have observed in which these signs presented themselves, only two recovered, and one of these was confined to bed for some weeks, owing to the weak condition of the heart, while the other's trouble was explained by the existence of obstinate constipation, and disappeared on the successful exhibition of a purgative.

The time at which the fatal result ensued, varied. The shortest was about half an hour; the longest several weeks; the average from three to twelve hours after the warning.

With regard to treatment there is little to add to what is usually found in text-books and adopted.

The liability of stimulants given by the mouth to provoke the continuance of vomiting, renders it an undesirable method of administration.

If retained by the bowel give your alcohol *per rectum*, or if not, along with the strychnia, digitalis, etc., hypodermically.

Nourishment in the form of raw eggs and pep-

tonized milk *per rectum*, or by the mouth, if tolerated, should be given in small quantities, frequently repeated. Mustard poultices to the epigastrium do much to relieve pain, while a smart purge removed the symptoms entirely in one case and seemed to afford some relief in others.

A patient having once presented these symptoms during an attack of diphtheria, should be most rigidly kept in the horizontal position for a much longer time than would otherwise be done, and by the administration of tonics, etc., and the exercise of due caution for some time after rising; the danger reduced to a minimum.

"AN OVERCROWDED PROFESSION."

There can be no doubt that the profession of medicine has become terribly overcrowded in Ontario, notwithstanding the raising of the standard of matriculation by the Col. of Phys. and Surg. Each successive effort made to discourage candidates for the magic M.D., succeeding only in filling the halls of the Medical Colleges with an increased number of school teachers and farmers' sons, who imagine that the profession must have a "good thing" that they are trying to keep others away from.

Viewed from every standpoint the future of medicine as a means of making a living is a black one indeed, and there can be no doubt that every man enters medicine with that end in view, apart from any view of a philanthropic nature, for every man must live, and in a new country such as ours, there are very few who have had the good luck to have a large enough fortune to enable them to use medicine as a means to an end in furthering scientific research.

In former days, in Canada at least, the doctor had a very much higher standing in the community than at the present time when education is so cheap and so common that the professional ranks are filled with men who have no real qualifications for this calling other than the parchment containing their easily won degree.

The proportion of medical men to the population at large in Ontario, is about 1 to 600, and steadily getting worse. In Toronto it is even greater, so then any one can see that there would not be a living if practice was equally divided among the practitioners, and we know that some of them have quite large incomes, though they are