

gents, but the eustachian canal, through which the infection of the drum had occurred, would also be subjected in the simplest manner possible to the same curative treatment.

When the patient lies on the side the central perforation is almost in a line with the tympanic opening of the eustachian tube, thus forcing the passage of the alcohol from the one to the other. Not only so, but when we remember that the eustachian opening into the tympanum is in the anterior superior quadrant, the drum being filled with alcohol, a change of position would insure its application to all parts of the cavity, including the attic and even the antrum. Effectual treatment of the eustachian tube is thus easier of accomplishment than by the direct method, while the positive treatment of the tympanum is at the same time secured.

I will not burden the section by a report of cases, but will close by stating that in many instances I have followed out the line of treatment indicated, and in both chronic cases and subacute I have found it eminently successful. In nearly every instance the discharge of pus has ceased. In all the hearing has improved with the arrest of the leakage, and odor has passed away, and the general health has been restored. The longest period of suppuration was eight years; the shortest, two months. The oldest patient was 50 years of age; the youngest, only 6; yet all were benefited by the treatment.

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### PROFESSIONAL AND PUBLIC ASPECT OF THE PNEUMONIA QUESTION.\*

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**P**NEUMONIA heads the list of those diseases before which our profession humbly bows in recognition of conquest. With an ever-increasing mortality confronting us, especially in large centres, nothing has been offered which is in any degree comforting as suggesting that the tables will soon turn in favor of the human element which is forced to submit annually to this infection.

Primarily interested for the last five years in the great sister lung infection, "tuberculosis," I have been constantly struck with the fact that pneumonia frequently doubles tuberculosis in the number of deaths it claims per month. Naturally, such a condition of affairs suggests the striking contrast existing between the vast amount of money raised and spent upon the control of one lung disease while a much more fatal infection is almost wholly neglected. This state of affairs is largely due to our lack of positive knowledge of the conditions surrounding the onset of this infection, the changes by which the body strives to resist the

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