

ippecacuanha with one-eighth of a grain of morphia every four hours.—May 29th: The tumor measures an inch across, and is very slightly raised above the skin. The surrounding swelling has disappeared, as has the black slough; the sore is discharging a little. The pain has left him; the axillary glands are still a little swollen. He feels well, and has a fair appetite.—30th: Feels well; swelling reduced to about half an inch, and the ulcer is much swollen; axillary glands no longer swollen. The internal use of the drug discontinued.—31st: Swelling and sore about the same size; the loosened slough is projecting from the opening. The wound was dressed with resin ointment, and healed like an ordinary ulcer. About three weeks before the pimple appeared he visited the farm of his brother-in-law, where sheep were dying of splenic fever (about 100 died). He went to the sheep kraals, but does not remember that he touched the sheep.

CASE 2.—D. N——, a transport rider, forty-two years old, a strong healthy man; charbon seven days. He noticed a blackish pimple on the back of his hand, which itched violently and increased rapidly, making him feel ill, but he managed to get about for the first six days. On the seventh he was too ill to get about any longer, feeling chilly, with pains throughout his body, and a tendency to faintness. Towards evening the pains left him, and he went to bed. At 10 o'clock his symptoms became alarming, and I saw him for the first time. I found him propped up in bed unable to lie down without a feeling of suffocation, or to sit straight up without fainting. Pulse rapid, weak, and irregular. On the back of his hand was a sore more than an inch in diameter, from which protruded a blackish purple mass, partially covered by a white translucent membrane. Surrounding the sore was a hard swelling extending for about two inches. The arm was red and swollen to above the elbow, with numerous blackish vesicles on the wrist. Ipecacuanha having been applied to the sore, he was directed to take five grains with a little morphia every four hours. An hour after the first dose he vomited slightly, and

then was so far relieved as to be able to lie down and sleep in a disturbed manner until morning.—Eighth day (morning): He feels somewhat dizzy and very weak, but otherwise well, and wishes to get up. On uncovering the sore, it was found to have shrunk to half an inch, and the black centre had shrunk into a greyish slough. The surrounding swelling and redness were gone, as well as the redness and swelling of the arm. The blackish vesicles were dried up; the glands in the axilla still somewhat swollen.—Evening: Glands no longer swollen; state otherwise much as in the morning. Refuses to take the medicine any more, as it makes him vomit.—Ninth day: Feels weak, but otherwise well, and is allowed to get up. Wound dressed with resin ointment, after which it healed without anything to remark. But for prompt treatment this case would almost certainly have proved fatal within a few hours. The source of infection could not be traced.

CASE 3.—A. Z——, a farmer, assisted to skin an ox, which had died of splenic fever. Shortly afterwards he felt an itching spot which developed into a pimple with a black vesicle, increasing in size and forming a charbon. He was first seen on the evening of the eighth day of the disease. He had a sore about the size of a half-crown on the palm of his hand, near the thumb, with a blackish slough; the arm was red and swollen to above the elbow, with numerous blackish vesicles round the sore and in front of the forearm; the axillary glands were swollen; the hand and arm were very painful, with deep-seated suppuration beneath the palm. He could not stand up without feeling pain, and felt chilly and wretchedly ill. Ipecacuanha was applied to the sore and five grains given internally every four hours.—Ninth day: Feels no longer ill, but weak, and the swelling in the arm is much less; the vesicles have disappeared. An incision was made in the palm, giving exit to pus and sloughs. From this time he recovered, with two of his fingers stiff and contracted.

CASE 4.—Mrs. V. D. M——, about