

course of a few years gained more and more friends on this side of the Atlantic, and it proves that the dangers which were formerly charged against intubation must have been very greatly exaggerated."

And again, in giving the true explanation of the insignificant results obtained by means of secondary tracheotomy after intubation had failed, as follows: "The extraordinary small percentage of recoveries from these secondary tracheotomies is explained in this way: that in the majority of these cases secondary tracheotomy is resorted to after the diphtheritic process has extended to the bronchi, and that, under these circumstances, tracheotomy could not accomplish any more than intubation."

Similar testimony as to the value of this procedure comes from Hungary. Bokai, medical director of the Stefanie Children's Hospital of Budapest, has already intubated over 500 cases of croup, with recoveries of thirty-six per cent. In the medical report of the hospital for the year 1892, with an experience at that time of nearly 300 cases, Bokai, after referring to the necessity of having an additional diphtheria pavilion constructed, proceeds as follows: "That this construction was required was demonstrated by the fact that all the beds and extra rooms were continuously filled. The cause of this great attraction of our diphtheria division was due chiefly to the employment of intubation, and it gives us pleasure to be able to state that this procedure has given splendid results, so that tracheotomy has become almost wholly superfluous. In consequence of these splendid results, numerous friends have been added to the side of intubation, both in the country as well as in the city, and many colleagues have availed themselves of the rich material at our disposal to practise intubation under our direction. Convinced of the extraordinary importance of O'Dwyer's intubation in hospital as well as in private practice, I deemed it my duty to so instruct my colleagues, and it gives us pleasure to say that this acquisition has spread from our hospital throughout all Hungary."

Such is the evidence regarding the present status of intubation in Europe furnished by men whose reputations are more than national, and whose experience with this procedure has been amply sufficient to entitle them to speak on this

subject with the voice of authority. It will be noticed that the percentage of recoveries is considerably larger in Europe than is generally obtained in this country, and the same is also true of tracheotomy. The ready accessibility at all times of a skilled intubationist should give some better results in hospital than in private practice, which may in part explain the difference, as the statistics from the other side come exclusively from the hospitals, while in this country they are furnished, with few exceptions, from private practice. In 186 cases treated at the Willard Parker Hospital in New York, thirty-eight per cent. recovered, while at the Boston City Hospital 392 cases gave only twenty per cent.

In the former the resident physician and one trained assistant performed all the intubations, while in the latter they were done by successive house staffs, each member of which had charge of the diphtheria division in rotation. Under the latter circumstances the individual experience was necessarily small, so that no single operator could have had a sufficient amount of practice to enable him to avoid the accidents, not infrequently fatal, that are inseparable from intubation in the hands of the novice. That the different conditions which existed in these two hospitals explains the great discrepancy in the results I do not believe; but that they were sufficient to produce a very considerable difference in the percentage of recoveries there is not the slightest room for doubt.

In regard to the comparative merits of intubation and tracheotomy as life-saving measures in the treatment of croup, I do not know of any stronger argument that could be produced in favor of the new procedure than a short quotation from a paper by Dr. L. S. Pilcher, of Brooklyn, during a discussion on this subject before the King's County Medical Society (*Brooklyn Medical Journal*, August, 1893).

Dr. Pilcher, while advocating the claims of tracheotomy as the greater life-saving operation, makes the following very candid statement: "I believe that it has been my lot to be called upon to do tracheotomy for the relief of croup in a considerable proportion of the cases that have sought surgical relief, and yet during the seventeen years in which I have been operating I have been called upon to do the operation but 66 times, notwithstanding the deaths from croup in our city during