

in the CANADA MEDICAL AND SURGICAL JOURNAL in February, 1878. There are four causes of death which have to be guarded against. The first is a rapid and often sudden sinking, like syncope, which is apt to occur on the third, fourth and fifth days. The second cause arises from putrefaction of the false membrane causing septicaemia and hæmorrhage. The third is a diphtheritic croup, and the fourth is paralysis, sometimes taking place five or six weeks after apparent recovery. During the first two days of the attack the temperature often reaches 105°, although more frequently it is less. This can be speedily reduced by the free use of the salicylate and acetate of ammonia combined, also by the application of cold water to the throat under the chin and sponging with tepid water. As soon as the membrane is formed antiseptics must be applied either by a soft brush, atomizer or syringe. I do not believe it makes much difference what antiseptic is used as they are all good, such as brine, alcohol, iodine, sulphurous, salicylic, boracic or benzoic acids. The swabbing mixture I have always used is composed of Acid Carbolie, Tinct. Ferri Mur. Chlorat. Potass. Glycerine and Sulphurous acid. It has been my practice in severe cases to swab the throat every three hours, but lately I have learned that so frequent swabbing is unnecessary, and I am glad such is the case, as the operation causes a good deal of trouble both to the operator and patient. Three or four times a day is often enough. After the fever has been reduced I give every two hours a mixture composed of Chlorat. Potass., Tinc. Mur. Ferri, Sulphurous acid, Glycerine and water. This mixture acts as a powerful antiseptic and ought to be continued for two weeks after recovery, but only three times a day. If symptoms of sinking come on I give aromatic spirits of ammonia. The cold water application to the neck ought to be continued until all swelling of the throat internally or externally are dispersed. By attending carefully to these directions putrefaction of the membrane is almost certain to be prevented and thus obviating the second cause of death. It is doubtful if anything can be done to prevent croupal symptoms than by carefully attending to the first stage of the disease. Paralysis, I