

disease, I utterly deny. And here, in an opinion at variance with such a name as L. Golding Bird, let me ask you, if your own observations will not join me in the assertion, that there is a marked difference between Rheumatism in Europe and Rheumatism in Canada, particularly those of you, who have had an opportunity of seeing cases in the Hospitals of London, as well as this country—nothing struck me more forcibly Not to detain you with the question just now, I may allude to the well known fact that in England the Chronic form tends to Rheumatic Gout, while in this country it assumes the nature of Palsy. However, that the excretions in some cases, and often in certain stages of the same cases, will acknowledge the test of alkaline and acid excess respectively, I think I may safely state as proven; hence it is our duty to seek out the admonitions that chemistry suggests and govern ourselves accordingly.

The powerful antiseptic and disinfecting effects of Chlorine have been long known, but until the accidental discovery of the Chloride of Potassium, a few years ago, the different forms in which it was necessarily administered, contained objections commensurate with its advantages. This salt is free from any of the difficulties of former preparations—not so caustic for local use, as Chloride of Lime, and more effective than the Chloride of Sodium, it imparts its Chlorine readily and leaves the potass, a mild caustic and gentle stimulant as could be wished—and wherever it has been applied to foetid and indolent ulcers, the whole array of yeast and charcoal and other carbonaceous applications have fled before it in confusion. In that modern and most dreaded disease, Diphtheria, there appears to me no safety in any other remedy.

It is a malignant fever with putrid sore throat, the whole lining surface of the fauces and pharynx, throwing off a false membrane, which again immediately forms attachments in places and thus hastens dissolution by a mechanical obstruction. Gentlemen, whose opinions I cannot but respect, still place their trust in the Nitras Argenti, but its application is very difficult, as it should touch *only* certain places, and its effect uncertain—while two or three free applications of the Chloride of potass with a sponge, will almost completely remove the local difficulty, and leave you a fair wind and an open sea. Thus we have viewed Chemistry only as an adjunct or a chief assistant at our labours, but as we rise in the scale of disease, and find, as we do so, our difficulty increase and our skill more at fault, we may be induced to look to this science as the polar star in our distress, and the guiding spirit to carry us through the storm. To include under one general term, the different disorders of this kind, such as Albuminuria—Tuberculosis—Phthisis—&c—I will speak alone of Scrofula or general cachexia, and of course will not attempt any minutiae of detail.

We find an excess of fluid over the solid part of the body as well as deficiency of fibrine or muscular fibre, and often total want of some important constituents of health such as phosphorus and sulphur. Or we have excess of hydrogen with loss of nitrogen. On the use and distribution of these two elements depend, almost solely, our hopes of cure; simply using carbonaceous and oxygenated substances as nourishment, to keep good the supply and preserve the waste, until we can effect a change in the other ingredients. That chemical changes do not take place with the same certainty, and regularity in the system, influenced by