shall lecture on the colors and patterns of dresses and on the characters of animals," Another was, "My funeral shall take place at 3 p.m., the hour at which the rooks of the Louvre come home to dinner." The will was held to be valid, the Court saying "that these peculiarities were but the absurdities of a vain man." The peculiarities of the eccentric are as varied as are the phases of the mind, and it has been well said by Redford, in his "Treatise on Wills," that "The *eccentric* man is aware of his peculiarity and persists in his course from choice, and in defiance of popular sentiment; while the *monomaniac* verily believes he is acting in conformity to the most wise and judicious counsels; and often seems to have lost all control over his voluntary powers, and to be a dupe and victim of some demon like that of Socrates."

Without entering into details, which would need a volume to elucidate fully, it is well in every case to consider whether the aberrations are such as would warrant us to sign a certificate of insanity to commit to an asylum for treatment and safe keeping. If we do not consider such to be safe at large, they are not responsible beings. We should examine as to delusions and ascertain if they are sufficiently strong to warp the judgment and seriously affect the conduct of the individual; or, if they are of such an insulated nature as not to interfere to an appreciable extent with volition, and are not joined with morbid emotions and sentiments. It is also important to observe if the moral feelings and passions are perverted, if measured by a common standard, or better still by the patient's former temper and character, and if these are sufficiently morbid to affect the power of self-control. The impulsive form of insanity is to be examined with great care, for under its guise real culprits take shelter to avoid just penal consequences. The strongest evidence of its existence should be made manifest to a medical witness before he testifies to the presence of mental disease in such cases. If these cardinal points are kept in view, an aid to intelligent testimony will be the result.

TREATMENT OF DIPHTHERIA BY SALICYLIC ACID.

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Diphtheria is one of the most dreaded diseases of our climate, and justly so. Hitherto the treatment of it has been, to say the least, unsatisfactory. I feel certain that any remedy which will act upon it in a curative manner with any degree of certainty, will be hailed with delight both by the members of our profession and by the laity.

I think that in *Salicylic Acid* we posses such an agent. I am not aware that it has been reported in any of our journals in this connection, and a feeling of its great worth impels me to make known my experience of its use. The theory of its action is probably to be explained by its anti-putrefactive properties, both topically and generally. In practice it will be found to prevent decomposition of the false membranes in the fauces, the consequent fœtor, and the blood-poisoning due to the ingestion and inhalation of putrid matters. It also seems to exert a special *tour de force* against the diphtheritic poison in the blood, for, the patients in whom I have exhibited the remedy, became immediately much brighter, and lost the great inertia so constantly observed in this disease.

The way in which I have given the remedy is in *small* but *frequently repeated* doses. By this means an immediate local effect is produced and maintained, and within a reasonable time the constitutional action of the drug is manifested.

R. Acidi Salicylici . . . . ℥ i
Pulv. Acaciæ . . . . . ℥ ij
Syr. Simp. . . . . ℥ ij
Aquæ puræ ad. . . . . ℥ iv—M

Mix the powders together in a mortar, add the syrup, and when these are thoroughly incorporated, add the water in successive portions, This makes a creamy mixture which is taken readily by children. The dose of the above is a teaspoonful every hour, to patients between 3 and 10 years of age. I also swab the throat twice or thrice a day with a solution of carbolic acid and glycerine. 1 to 7. The dietary of course should be of the most nourishing and easily digestible order, and in considerable quantities.

During the past month, I have had five cases of undoubted diphtheria in all its gravity. Under the treatment here indicated, they all recovered without a bad symptom. The average age was 4¾ years. The average confinement to bed was three days, and to the room five days. The patients were allowed to sit up, as soon as their throats were completely free from false membrane. During the progress of the disease, the acid produced no