cimicifuga 5ss. ter. die., increased to 3i. Under the latter remedy she seemed to improve somewhat, being able to feed and dress herself and move about pretty well. Discharged after 67 days' treatment.

Case 4.—Chorea, with pregnancy about 6 months, under Drs. Wright and Rogers; primipara, aged 22. History: About fourth month, movements commenced in left arm, and gradually became general; no history of rheumatism; no cardiac affection.

Condition on admission: Highly emotional, motions general and very marked.

Treatment: Bromides; induction of premature labor on ninth day; delivery of dead fœtus; discharged cured on seventeenth day.

Case 5 —Chorea, with pregnancy between fourth and fifth month, under Drs. Wright and Rogers. History: Aged 23; I child living, aged 2 years; no rheumatism, shock or injury; very weak and anæmic: badly nourished; movements appeared about a month before admission; movements chiefly facial at outset, but rapidly became general; mental condition feeble; great prostration.

Treatment: Bromides, arsenic and tonic; movements soon controlled, but general condition did not improve; mental condition, one of dementia; labor induced after 3 weeks; dead fœtus removed; death on fifty-first day from asthenia.

Case 6.—I.M., aged 12; female; admitted under Dr. Powell. History: Attack commenced about a month before admission; rheumatic pains in legs and feet first complained of.

Condition on admission: Well nourished, but somewhat anæmic; no cardiac lesion; movements general; unable to feed herself.

Treatment: Liq. Fowler, M ii. ter. die., gradually increased up to M x. ter. die., and then reduced; cured in five weeks.

## NOTES OF FOUR CONSECUTIVE CASES OF RECENT INTUBATION OF THE LARYNX IN DIPHTHERIA.

BY ALFRED J. HORSEY, M.D., M.R.C.S. ENG., L.R.C.P. EDIN.,

Oculist and Aurist to the County of Carleton Hospital, Ottawa.

The recent antitoxine serum treatment of diphtheria having brought intubation of the larynx more prominently into notice, because of an extended field of application, and since Roux has

declared it with the serum injections to be the most favorable treatment, some brief notes of the following cases, in only one of which serum was used, may not be unworthy of record.

In none of them was a bacteriological culture or diagnostic test made, which, in our present unsettled knowledge, and the frequent failure to find either Læffler's bacillus or streptococci or staphylococci in well-defined clinical and even fatal cases, should not take from the value of the cases, which, with one exception, were well defined clinically.

Case 1.-W. A., aged 27 months, on whose tonsils small, symmetrical colonies or semi-membranous patches were first discovered on December oth; the throat having been examined, not because of complaints, but on account of two cases of mild diphtheria in adults in the house, and since the occurrence of the case I am reporting, by marked diphtheria in a brother aged 6 years. Alarming symptoms setting in on the evening of the 10th, Dr. H. P. Wright, who was in attendance, kindly called on me to see the case with a view to intubation, as the breathing had become difficult and audible with retraction of chest-walls, the voice suppressed and cough croupy. Intubation was at once advised, but deferred, to allow of a trial of a change of medical treatment, viz., sublimation of calomel under a tent, with instructions to summon me if it were not successful.

At 6 o'clock the next morning, December 11th, I was called, and found symptoms generally much more unfavorable, and relief from impending suffocation urgent, so at once inserted a tube (O'Dwyer's) with immediate and marked relief, which was maintained during the day and following night, for thirty-one hours, when the tube was removed, as indication for further retention having to a great degree ceased. Medical treatment, which was not of a specific nature, was continued without interruption during the retention of the tube; liquid and semi-solid food was swallowed without inconvenience. So little trouble did the tube give that it was difficult to believe that a heavy, metal, hollow cylinder, 134 in. in length by 1/4 in. in diameter, occupied the larynx beneath the epiglottis.

Nothing noteworthy occurred during the ensuing week, at the end of which time convalescence was fairly begun, and at present fully completed.