

this address, which by a masterly treatment of the facts places the prophylaxis and treatment of diphtheria on a broad scientific basis, Professor Welch does not think that the hopes of Roux and Yersin, that the method may yield good results in the hands of unskilled persons, are likely to be realised. He thinks that an elementary training in bacteriology is needed in those carrying it out, and suggests that as elementary courses on bacteriology have now become so common that it will not be long before most communities will possess at least one person capable of doing the work satisfactorily. My own experience has shown me that doubtful cases, which are those in which the value of the method should be best shown, the chief difficulty is in obtaining suitable material for examination are of two kinds—first, those where the condition resembles tonsillitis and the exudation is confined to the tonsils; and, second, those where the local disease is situated in some part of the respiratory tract not readily examined, or where the severity of the constitutional symptoms renders a prolonged examination difficult. As the procuring of a small piece of the false membrane at the earliest period possible is the *sine qua non*, and to do that in this latter class of cases requires a special manipulative skill only possessed by a skilled laryngologist, the task will properly fall to this individual. The aid of a throat specialist seems indispensable in cases where the local examination presents much difficulty. Possessed of suitable material, the best results in the further examination would certainly be obtained in a properly equipped laboratory.

In the cases where the confusion arises from the membrane being confined to the tonsils, the case is much more simple, and there is less need of the services of the laryngologist; all that is required being to detach a small piece of the exudation, wrap it in paper, and send it to some laboratory for examination.

Considering the gravity of the interests at stake in the prompt recognition and isolation of cases of diphtheria, one would naturally suppose that a method which enabled a positive diagnosis to be made within twenty-four hours, in cases seen during the first days of the illness, would be welcomed eagerly by the profession. That this has not happened is due probably in great part