notch and dilation of nostrils during inspiration, and evidence of deficient æration of the blood in the livid countenance and blue lips. In all cases the pulse was rapid and feeble, with more or less elevation of temperature. From my experience in these cases, I firmly believe that all of them would, if they had not been quickly relieved, soon have ceased to breathe. The insertion of the O'Dwyer tube gave as great and as rapid relief to the patient as the insertion of a tube into the trachea. There was less coughing and irritation immediately afterwards than occurs after tracheotomy. The respiration became at once easy and free. The patient passed suddenly from a condition of great restlessness and distress to one of comparative quiet and ease. I have in only one case pushed down membrane ahead of the tube. In this case, on removing the tube and re-inserting it the passage was clear. In one case only did the tube subsequently require to be removed on account of its lumen becoming filled up with the pseudo-membrane. Four or 40 per cent. of these cases recovered. In two of the successful cases the tube was coughed up on the third day, and in two I removed it on the fourth and fifth days. The advantages claimed for intubation over tracheotomy are—

1. No anæsthetic is required.

2. It has less of the horrors of an operation about it. Parents will generally yield a ready assent to the proposal to intubate, while it is with great difficulty that their consent to tracheotomy can be obtained, especially when such small hope of recovery afterwards can be held out.

3. The subsequent attendance is less irksome. All my cases have been in the houses of the poor. The only nurse obtainable has been the mother, who has been obliged to be nurse and at the same time give more or less care to other children and to her house, aided generally only by the kindness of some fearless and sympathetic neighbor. These people often cannot afford a trained nurse, and but few of these mothers possess sufficient intelligence and nerve to perform the difficult task of caring properly for a tracheotomy tube.

4. The mucus does not dry in the tube and diminish its calibre