

CASE VI.—(C.D.), a girl, aged 4½ years, with a chronic, rather painless, swelling of the left knee. It was diagnosed to be of tuberculous origin, and with the consent of her parents she was put under Koch's treatment. No evidence of tuberculosis elsewhere could be found.

Dec. 24th.—She was injected with $\frac{1}{100}$ c.cm.; or, rather, with $\frac{1}{10}$ c.cm. of the 1 per cent. solution diluted ten times further, giving her thus $\frac{1}{10}$ c.cm. of a cubic millimetre of the pure lymph. This minute dose gave definite reactions—the temperature 101° , accompanied by pain in the back, etc. An important change also took place in the knee, which became hot and very tender.

The injections have been repeated as follows:—

Dec. 28th.— $\frac{1}{10}$ c.cm. of the above $\frac{1}{100}$ dilution.

Dec. 31st.— $\frac{1}{10}$ c.cm. of the same.

Jan. 8th.— $\frac{1}{10}$ c.cm.

Jan. 14th.— $\frac{1}{10}$ c.cm.

Jan. 19th.— $\frac{1}{10}$ c.cm.

In every case there was constitutional reaction, with nausea, headache, etc., and elevation of temperature; and local symptoms, as heat and excessive tenderness of the affected knee. Although the measurement of the knee had been taken before the first injection, it was not measured afterwards to note swelling, but with this exception enlargement of the knee or inflammatory swelling has occurred, after every injection, from $\frac{1}{2}$ -inch increase in circumference after the second injection, to as much as $\frac{3}{4}$ -inch after the fourth. Between the injections the swelling decreases and knee regains its normal size; the tenderness disappears and patient regains her cheerfulness.

Treatment of this case is to be completed by operation, comparison being instituted with a similar case now in the wards which is not receiving the Koch treatment, and which will be operated on at the same time.

CASE VII.—W. B., a young man, aged 20. One year ago he was operated on and a chain of tuberculous glands in the left parotid and submaxillary regions dissected out, the wound healing rapidly.

He returned to hospital a few days ago with a small sinus above the left sterno-clavicular articulation. This sinus followed a small abscess which had formed in this region, no cause other than suppuration of a tuberculous gland being made out. In both submaxillary regions, and both axillae, a few glands from the size of a pea to that of a bean were noted, none of these being tender. No pulmonary involvement was made out.

Jan. 15th.—He was injected with $\frac{1}{10}$ c.cm. of the 1 per cent. solution. A slight rise of temperature followed this, with headache and backache and a feeling of heaviness; but no local manifestations were observed.

Jan. 16th.—Injected $\frac{3}{10}$ c.cm., causing another slight rise of temperature, with more severe headache and backache. Locally, there was a distinct increase in the amount of pus issuing from the sinus.

Jan. 17th.—Injected $\frac{1}{10}$ c.cm., with just about the same constitutional reaction as the day before, and nothing new locally.

Jan. 20th.—Patient's temperature was quite normal after three days intermission of the treatment. Headache and backache had left and appetite returned. The increased discharge of pus from the sinus was still present. This day he was injected with $\frac{1}{10}$ c.cm., and got a most