

formation can be gained by physicians reporting their successes and failures. However, after having used it quite extensively, I am convinced that it is a reliable blood remedy to use in general practice.

*Case I.*—A boy 8 years old. His father died of pulmonary tuberculosis; otherwise his family history was good. Two years ago he began to get sick at the stomach in the morning and vomited. He was sleepless and coughed considerably. Temperature, 99.5°; ankles were slightly edematous. Upon examination it developed that he had a heart murmur systolic in time, but not transmitted. His blood examination showed 3,500,000 red cells, hæmoglobin, 50 per cent. There were no physical signs of lung consolidation. No tubercular bacilli found in the sputum. The patient was placed in bed, and a nutritious diet ordered. He was also given Pepto-Mangan (Gude), a teaspoonful four times a day. In a very few days his symptoms began to improve. Although he was nauseated and vomited frequently when I first saw him, this trouble was not increased by the medicine and in a very few days his nausea stopped and did not return. At the end of ten days the heart murmur could not be heard. His color cleared up and he is now well, to all outward appearances. A second blood count was not made, but from his appearance it is evident that the hæmoglobin is near the normal.

*Case II.*—Miss M., age 19. Family history negative, except that one brother died of pulmonary tuberculosis at 22 years of age. She had been healthy until December, 1903, when she caught cold and coughed considerably. She was relieved of the cold, but the cough continued. Expectorates considerably. Normal weight, 105 pounds; now weighs 97 pounds. Temperature is usually normal, but thinks she has some fever in the evenings, but not every evening. Two or three times she sweat at night, but has not done so regularly. Never expectorated any blood. Is restless at night. Appetite poor; constipated; looks very anæmic. Pulse, 90 lying down, 96 sitting, and 100 standing. No signs of consolidation or cavities in the lungs. There are a few râles present, but the expiratory effort is normal. Has a chest expansion of 2½ inches. Blood count showed red cells, 3,040,000; white cells, 4,600; hæmoglobin, 60 per cent. While this looked some like tuberculosis, the sputum, on repeated examination, showed no bacilli. She was told to stay in the open air as much as possible, sleep with the windows open, and eat plenty of good nutritious food. She was also placed upon tablespoonful doses of Pepto-Mangan (Gude) four times a day, with marvellous results. In five weeks her blood count showed red cells, 4,200,000; hæmoglobin, 85 per cent. The general symptoms were very greatly improved. She went West, but has continued the treatment and an occasional letter informs me that she is now absolutely well, and has greatly improved in weight.