

when fatal, terminate either by rapid prostration of the vital powers, or by an affection simulating croup, from extension of the diphtheritic membrane into the air-passages; in both instances, death is usually preceded by obstinate vomiting, probably the result of inflammation or irritation of the *par vagum*.

The prognosis must, at all times, be very guarded, but will depend much upon the disease being from the first recognised and energetically treated; for the mild form, if left alone or improperly handled, will quickly pass into genuine diphtheria, when the prognosis becomes more unfavourable, although modified by the duration of the disease, and the age and temperament of the patient.

The treatment is divided into constitutional and local, and varied according to the severity of the case. Even in the mild form, or diphtheritic sore-throat, it will be found advisable in the first instance, to confine the patient to bed in a well-ventilated room; if the bowels be sluggish, a brisk calomel purge should be given, but under no circumstances should any other antiphlogistic measure be resorted to, but a liberal diet at once enjoined, consisting of strong beef-tea, port-wine, jellies, and farinaceous food, which ought to be administered at short intervals, and in moderate quantity. The following draught to be taken every three or four hours:—Chlorate of potass, from ten to thirty grains; dilute hydrochloric acid, ten to thirty minims; decoction of bark or water half an ounce to an ounce. The dose of the salt and mineral acid to be increased according to the age of the patient. The topical treatment consists of sponging the fauces, two or three times a day, with a compound solution of alum (L. P.); by means of a piece of soft sponge attached to the end of a pen-holder, or portion of whale-bone; the patient, also, if not too young, should gargle frequently with a strong solution of alum. The speedy removal of the white patches, by this local application of alum, renders highly probable the suggestion that the deposit is a fungus.

In treating the severe form, or *genuine diphtheria*, is it most important to guard against being misled by the feverish excitement, and thereby be induced to adopt antiphlogistic remedies. It should be borne in mind, that the fever is the result of a poison analogous in type to adynamic erysipelas; and as it would be unwise to treat the latter disease by lowering the system, so would any depleting means, for the purpose of reducing the fever attending diphtheria, be fraught with danger. The pharynx should be sponged every eight hours with a solution of lunar caustic (sixteen grains to an ounce of distilled water), and for this purpose the sponge, by being easily compressed between the swollen tonsils, will be found preferable to a brush. A most liberal allowance of wine and nutritious diet must be instituted from the first, and the following draught:—Chlorate of potass, from ten to thirty grains; tincture of sesquichloride of iron, ten to thirty minims; syrup, a drachm; water, seven drachms; given every one, two, or three hours, according to the age of the patient and the degree of pyrexia present; the more intense the inflammatory symptoms, the oftener should the draught be exhibited; nourishment also should be given in definite quantities at short intervals. It will happen, not unfrequently, with very young children, that *some time* before the mechanical obstruction precludes deglutition, all voluntary efforts at swallowing will be obstinately resisted, from pain, and disinclination to be aroused. These cases excite the greatest anxiety, as unless a sufficient quantity of support can be taken the vital powers must quickly succumb to the influence of the poison. Still all attempts to give medicine or food by the mouth should now be discontinued, and an enema of strong beef-tea and port-wine (one ounce of each), be administered, per rectum, *every two hours*; also, for a child above three years old, five grains of quinine should be added to each alternate injection. At bed-time, to procure rest, it may be advisable to add five minims of Battley's sedative. The glysters may be thickened with arrowroot; and, at intervals, milk substituted for the beef-tea and wine. The quantity injected should never exceed two or three ounces at a time, or it will fail to be retained; and hence the necessity for the frequent repetitions. The topical application of the nitrate of silver must be persevered in, and the patient allowed to sip any nutriment he will. By adopting this