

my condition appeared to be that of auto-intoxication brought about probably by a defective working power inherent in the organs primarily concerned in the processes of digestion and excretion—especially the liver and kidneys.

The object, then, of treatment in asthma, should be to encourage such a mode of life as will tend to procure and maintain a normal condition of the blood. No disease in the whole domain of medicine, unless it be rheumatism, is more benefited by a proper diet, or more aggravated by an improper one, than is asthma. Those foods should be selected which are most rapidly assimilated and readily oxygenated, and first upon the list is fresh, rare beef,—roasted or otherwise. I believe that rare beef not only generates a blood favourable to oxygenation, but one that is unfavourable to the osmotic outpourings of mucus so characteristic of the asthmatic.

Baths, light, altitude, etc., are also prominent factors in curing the asthmatic. Altitude may, in many cases, be advantageously substituted for drugs. In choosing a location for an asthmatic, however, the main object, other than altitude, is to avoid malarial districts, for there is no disease more destructive to the cellular constituents of the blood than is malaria. Some eight months ago my attention was called to thialion, a remedy much lauded as a solvent for, and to promote elimination of uric acid. I used the drug four weeks, taking each morning a large teaspoonful of the salt in a gobletful of hot water, and drinking, besides, during the day, three pints of Apollinari- water.

The above constituted the whole course of treatment, the results of which were simply astonishing. For five months I have had no asthmatic seizure, no pain, no headaches, and am able to walk rapidly about with no shortness of breath nor disturbance of any character. I have since used thialion in several cases of asthma, and results in all of these instances were uniformly good. The value of the remedy would seem to lie, not altogether in its virtue as a solvent of uric acid (for there are many other such solvents), but largely in its power to enhance cellular action of the liver—incidentally increasing the flow of bile and initiating intestinal peristalsis. In other words, it not only possesses the properties of certain other remedial agents, in removing from the system the uric acid already formed; but, in addition, owing to its peculiar cholagogue action, serves as a *prophylactic* agent in preventing the formation of any more,—for, that the liver is the principal uric acid factory in these lithæmic conditions, is a fact now quite generally accepted.

In this brief paper it has not been my intention to mystify, theorize, nor idly speculate, but rather to emphasize