

No definite rule can be given for the treatment of every case, but where there is no complication, the sore presenting the typical symptoms, the treatment which I have employed and found satisfactory, may be stated as follows: The discharge from the lesion is, as far as possible, to be prevented from collecting upon and around the sore; this may be done by frequent washings with water. The surface of the sore is kept dusted with iodoform, and is covered with a pledget of absorbent cotton. The simplicity of this treatment is a strong recommendation, and I can answer for its efficiency. Let me here say, the employment of iodoform is not from any supposed specific action of this drug; but, on account of the favorable impression it exerts upon any ulcerated surface. An objection, and a very serious one, to the iodoform application, is its penetrating, lasting and extremely unpleasant odor. This, however, can in a great measure be obviated by exercising great caution, in its application, not to permit any of the powder to come in contact with the patient's clothing; confine your dusting exclusively to the ulcerated surface, and carefully cover the part with cotton. A few drops of oil of rose added to the iodoform is also of service in masking its odor.

Where the iodoform treatment cannot be used, on account of some complication, such as a contracted prepuce, or intense inflammatory action, or refusal of the patient, then the other forms of medication may be resorted to, selecting such as the symptoms of the sore seem to indicate. I am inclined to think the advantage of the iodoform treatment over others is to be found only in the greater rapidity with which the process of healing progresses.—*Philadelphia Polyclinic.*

## THE TREATMENT OF CROUP AND DIPHTHERIA

### BY INHALATION OF THE FUMES PRODUCED BY THE COMBUSTION OF A MIXTURE OF TURPENTINE AND COAL-TAR.

Dr. Delthil, of Nogent-sur-Marne (Seine), in a memoir presented to the Academy of Medicine at Paris, March 25th, 1884,\* advocates, in the most enthusiastic terms, the treatment of diphtheria by a method which he claims to be "specific" for diphtheria have been so often and so confidently urged upon the notice of the profession, only to fall into desuetude when tested by more extended experience, and with a more critical spirit than has fallen to the share of their advocates, that physicians will naturally look with suspicion upon what seem *a priori* to be extravagant claims. Nevertheless, a careful perusal of this memoir cannot fail to impress the reader with the modesty, sincerity and accuracy of the author; qualities which, joined to the honorable titles he holds, require at our hands a careful and conscientious

consideration of the facts and arguments he sets forth. The writer confesses to having arisen from the study of Dr. Delthil's brochure with a strong prepossession in favor of the author, and a decided disposition to test the practice upon suitable occasion.

Assuming the verity of the theory, "universally held as demonstrated," of the parasitic origin of diphtheria, Dr. Delthil propounded to himself the following question: "What microbicide may we employ, which, with disintegrating powers upon the false membrane, will conjoin the property of penetrating the system by means of the respiratory tract, and which, without danger to the economy, can reach and combat the generalized diphtheritic poison?" After a lengthy series of experiments, he has made choice of essence of turpentine, as combining in itself all the desiderata. Thus, it will detach and disintegrate the diphtheritic exudation (Laboulbène); it is a parasiticide whose virtue needs no more to be demonstrated (Bouchardat); and it can be employed in the requisite quantity without danger to the economy.

The next point to be solved was the best method by which to apply the remedy. His experiments in this direction have been prosecuted more than eight years. He has used nebulizations of turpentine; direct applications to accessible parts; the introduction of liquid turpentine into the larynx by means of a syringe; the evaporation of hydrocarbons from a receiver of turpentine, contained in a waterbath, at a temperature of 50° to 60° (Centigrade). None of these methods proving satisfactory, he resorted for a long while to the following:—

In the patient's apartments were placed several large dishes, each containing a kilogramme of coal-tar seven or eight tablespoonfuls of oil of turpentine and about one hundred grammes of oil of cajuput. This mixture was allowed to evaporate. Besides this, he threw upon hot coals, every hour, a quantity of a powder containing equal parts of benzoin and coal-tar, and subjected the patient to fumigation with the vapors thus produced. In addition, accessible parts were washed with a solution of coal-tar and with lime-water.

He obtained from these methods very satisfactory results, but not sufficiently conclusive to warrant publication. He was struck, however, by the notable diminution in his practice of cases of laryngeal croup necessitating tracheotomy.

The great objection to the practice lay in the fact that, together with the respirable and beneficial vapors, there were also disengaged traces of creasote and of acrolin, disagreeable and unsuitable for respiration, and producing in some instances a sort of suffocation.

For these reasons he was led to modify his procedure; and for the benefit of all interested he has given the unsuccessful and partially-successful plans, as well as that which he now feels warranted in laying before the profession as a specific treatment for diphtheria.

\* D'un Traitement spécifique de la Diphthérie, par la combustion d'un Mélange d'Essence de Térébenthine et de Goudron de Gaz. Paris, H. Lauwercyngs, April, 1884.