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ORIGINAL ARTICLES.

(No paper published or to be published elsewhere as original, will be accepted in this department.)

CONSIDERATIONS CONCERNING DIPHTHERIA.

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The application of bacteriological methods to the study of pseudo-membranous inflammations of the upper air passages has resulted in placing our knowledge of diphtheria's condition only to that of tuberculosis. Evidence has been accumulated through this channel that serves, in part at least, to decide several mooted questions that have puzzled for so long a time investigators who viewed these troubles from only their clinical and anatomical standpoints.

It is the experience of every clinician that fibrinous inflammations of the upper air passages are constantly encountered upon which it is impossible, by the ordinary methods of observation possessed by him, to express a positive opinion as to their nature. It is in these cases that bacteriological methods of investigation are indispensable, and it is often through this means only that a correct diagnosis can be made.

The history of diphtheria illustrates with what frequency differences of opinion arise as to many points in connection with a disease of even so characteristic clinical and anatomical manifestations as this. Thanks to the newer methods of investigation, many of these doubts have been swept away, and the majority of the mooted questions satisfactorily answered.

The results of bacteriological studies that have been made upon cases of genuine diphtheria by many observers in different parts of the world since those of Loeffler, published in 1884, have been uniformly confirmatory of the views advanced by him at that time, viz: that diphtheria is a specific infectious disease, depending for its existence upon the presence in the pseudo-membranous deposits in the throat of the individual affected, of a micro-organism belonging to the family of bacteria—a bacillus of