ties, oysters and broths of all kinds, gruel, jellies, custards, etc., and the juice of oranges.

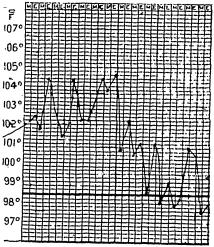
Throughout the attack it was necessary to use a catheter to draw off the urine.

The patient sat up on the eighth day for twenty minutes in bed, and on the twelfth day, was out of bed for a time.

II. A. W. B., aged twenty-three; Arts student. Admitted, January 20; discharged cured. Diagnosis, typhoid fever.

Patient was admitted to the General Hospital on January 20, complaining of frontal headache, pain in the back and limbs, loss of appetite, constipation and general malaise. Had not been feeling well for about two weeks prior to admission. Had chilly feelings followed by feverishness, Ladache, obscure pains in the back and limbs. Had no abdominal pain; was constipated.

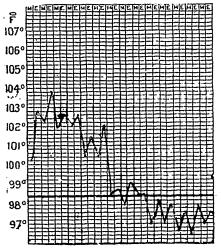
On admission his temperature was 102°, respiration 28°, pulse 120°, tongue slightly coated in the centre, no abdominal distension or pain, slight tenderness in right iliac region, no rash to be found on the body, lungs and heart normal examination of using



TEMPERATURE CHART.-CASE II.

lungs and heart normal, examination of urine showed slight albumen.

Subsequent history.—Temperature varied between 104° and 101° for a period of six days and then fell gradually to normal, but rose again to 102°, reaching normal again on the twelfth day and continuing so; pulse varied from 90° to 55°. A rash, formed of rose-colored spots, appeared on the abdomen on the second day after admission and continued for about a week. Had no abdominal distension through-



TEMPERATURE CHART .- CASE .III.

out the attack. One week after admission the right testicle became swollen, painful and tender, lasting, however, for only four days.

Treatment.—The patient was given salol, in doses of ten grains, every four hours, and at the end of the second week, some stimulant was administered. He was sponged whenever temperature ranged above 103. This never failed to lower the temperature considerably. Small doses of calomel, followed by a saline, were given when necessary to produce a movement of the bowels.

Patient was allowed throughout the attack to have, besides milk, small quantities of bread and butter daily, chicken broth, beeftea, strained porridge, cocoa, oyster broth and custards.

III. L. G., female aged 27, admitted to hospital, January 16, with usual symptoms of typhoid. A characteristic rash appeared, shortly after admission, on chest and