

A sketch of the paralysis consequent on diphtheria is then given. The paralytic condition may be *severe* or *mild*.

To trace the course of the latter form: the palate curtain is usually the first structure where the loss of muscular power is evident; coming on without warning during convalescence, the velum palati hangs pendent; direct excitation has no effect, nor is any movement induced by depressing the tongue, etc. When the limbs are affected, the sensibility is first interfered with; tingling and formication are the earliest symptoms; subsequently the motor power is found to be more or less at fault. The special senses are occasionally affected.

It would seem that the explanation must so far be found in the disturbance of the nervous system as a whole, consequent on the poisoning of the blood; the condition is therefore parallel to what is sometimes seen after fevers, etc.

TREATMENT. Although there be actual inflammation of the tissues involved, yet neither can the antiphlogistic treatment nor any of its modifications be employed with advantage. If such methods are resorted to, the only effect will be still more to reduce the already debilitated patient.

"Topical medication, despite the opposition with which it daily meets, is *par excellence* the treatment of diphtheria." (P. 404.)

Astringents and caustics have been resorted to from the earliest appearance of the disease.

Alum and tannin are of great value, blown on the throat in powder, or employed in solution. The more ordinary caustics, especially hydrochloric acid, are of essential benefit, applied early in the disease and with sufficient freedom. Should there be indications of commencing laryngeal affection, the local application of solutions of nitrate of silver to the upper part of the larynx, and to its interior even, may be employed.

The *general* treatment must be tonic and reparative. The administration of food will occupy the first place; frequent and liberal supplies. The forms of medicine of most value are quinine and preparations of iron, especially the perchloride and the syrup of the citrate or the tartrate.

Should extension of the disease to the air-passages take place in spite of whatever remedies may have been employed, there yet remains one important resource—*tracheotomy*.

On this point the testimony of M. Trousseau is of essential value. He has performed the operation (p. 414) more than two hundred times with success in more than one-fourth of the whole number of cases.

The operation is described at some length; the necessity of extreme slowness in the various steps is pointed out, and in every stage of the procedure there is a reference to some useful expedient.—*British Med. Journal*.

THE POTASSIO-TARTRATE OF IRON IN RHEUMATISM.

Rheumatism is a disease which, while it usually resists all the ordinary modes of treatment, will sometimes be found to succumb to one not commonly employed and probably little thought of. Dr. Willshire, (see *Lancet* of Jan. 11, 1862) at the Charing Cross Hospital, lately succeeded in successfully treating a case of this description, the pains of which were extremely erratic, by the medicine to which attention is now drawn. The patient was a somewhat pallid girl twenty years of age, her pains attacking various parts of the body. She had had the disease for three years, and had been subjected to various treatments without effect. She was ordered a mixture containing the Potassio-tartrate of iron, which produced a rapid amelioration. The catamenia in this case, it should be observed, were never disturbed. The report of the case concludes, that "in obstinate and suitable cases this excellent preparation of iron should be borne in mind."