

"inoculation—I take it that a larger dose might appropriately have been administered. Where, in association with a slight initial fall after inoculation, the index is, after the expiration of a week or ten days found to stand higher than it was at the outset, I take it that an appropriate dose has been administered."

However, Simon and his co-workers claim that the opsonic content of a person's blood varies much more than the determination of the opsonic index by Wright's method shows. For an opsonic index to be a safe guide, as I have indicated, extreme technical care and expenditure of time is necessary. Thus the opsonic index is said to range in healthy persons (Wright and Bulloch) from 0.8 to 1.2 for tubercle. Now, if the serum of a patient be compared with that of an individual whose standard is 0.8, and his opsonic index were 0.9, by which he is said to be free from tuberculosis, whereas if the standard serum were 1.2 his index would be 0.6, or tuberculous.

At the Sussex County Hospital we have examined the opsonic index of about 100 patients, some a great number of times, and certain of these have been treated by vaccines and improved. These have been tuberculous, staphylococcal, and streptococcal infections, and we feel justified in saying that, in cases properly selected, good results have accompanied the administration of vaccines and ill effects can be avoided.

A happy medium is to be drawn between a too rosy and a too pessimistic view of the value of vaccine treatment.

[We are not able to append Dr. Bushnell's figures on account of space. The most satisfactory cases are those of tuberculosis of the hip, knee, urinary tract, and epididymis; the organisms used are *B. tuberculosis*, *staphylococcus*, *streptococcus*, *pneumococcus*, *B. neoformans*, *B. diphtheroid*, *B. coli*, *B. pyocyaneus* and *B. typhosus*.—EDITOR.]

"HEPATIC TOXÆMIA."—"FATAL ACETONÆMIA."

BY

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On May 8th, C. B., female, æt. 14, was referred to me by Dr. T. L. Brown, of Richmond, for operation for acute appendicitis. The attack had commenced on the previous day at noon. The patient complained of excruciating pain in the right iliac region and vomited twice during the afternoon. The temperature was 100, and the pulse 90. Although the patient seemed somewhat improved the following day, Dr. Brown decided to bring her to the hospital for operation.