

lungs some moist râles. As far as could be ascertained, the patient had been coughing for 18 months, but had not been under any lengthy observation, neither had he been seriously treated. At this time dyspnœa was very marked upon the slightest exertion, emaciation advanced, cough troublesome, and expectoration profuse. The sputum showed Koch's bacillus in large numbers, along with streptococci. The tubercle bacilli were here and there slightly granular in appearance, but took the stain well. The pulse on the 15th November was 100 in the evening, and oscillated between 100 and 70, following the temperature curve, which varied from 100° to 97°, with morning remissions. Respirations varied from 18 to 26. There had been no hæmoptysis.

On the 11th of December he received his first injection of oxytuberculine, 5 c. c., which was continued daily for 6 days, when the dose was increased to 10 c. c. for about 20 days, with an occasional day upon which no inoculation could be made owing to severe reaction. The temperature curve during the early part of this treatment was increased, as well as the pulse and respiration curves. Usually after a 10 c. c. injection a temperature of 101° would fall to 98°. After the use of the first 100 c. c., the cough and expectoration had diminished, the patient felt stronger, the dyspnœa was less marked. Encouraged by this result the treatment was continued until 400 c. c. of oxytuberculine had been injected hypodermically. The last 200 c.c., however, did not produce the same reaction in bringing down the temperature, even when 15 or 20 c. c. were injected at one time. The treatment was here discontinued. Creasote and Syr. Hypophos. Co. had been given throughout, and were continued without much effect.

After this patient had received his first 100 c. c. of oxytuberculine the bacilli in the sputum showed distinct signs of sporulation, and this sporulation (which may be only a pseudo sporulation for a great number of bacteriologists) persisted for some time after the oxytuberculine injections had been stopped. This may have been only a coincidence, but is worthy of note as it only occurred in this one case of mine, which proved fatal about seven months after the oxytuberculine treatment had been discontinued, the patient