

ence of tuberculosis, the failure to find it in a given specimen does not, unfortunately, enable us to say with equal certainty that the disease does not exist.

In genito-urinary tuberculosis, the discovery of the bacillus in the urine renders the diagnosis certain, though from the great dilution, the task is much more difficult, requiring time and patience. The use of the centrifuge and animal experiments are both of great service in its demonstration.

In malaria, the comparatively easy demonstration of the plasmodium in unstained specimens, furnishes us with a simple method for its certain diagnosis. No experienced microscopist, who has once seen this beautiful organism, is likely to misinterpret changes in the red blood corpuscles for it.

Increasing experience with the serum reaction for the diagnosis of typhoid fever seems to justify the early hopes entertained for the usefulness of the method. A positive reaction is given in over ninety per cent. of the cases.

Possible sources of error from an examination of the blood before the agglutinative power has developed, pointing in doubtful cases to the necessity of repeated examinations, and the fact that the blood may retain this power for an indefinite period after convalescence, so that a previous attack of typhoid fever might give rise to erroneous results in the examination of the blood of persons suffering from other diseases must, of course, be given due consideration.

Practical results will probably also be established in the use of the serum diagnosis in other diseases besides typhoid.

The bacteriological examination, though as yet not entirely free from objections, is now generally used for the *diagnosis* of diphtheria. From this same examination, recognizing the association of bacteria, a certain amount of information of prognostic value may be obtained.

In obscure septic cases, the making of cultures from the blood has proved of considerable practical use—cases of septicæmia due to the streptococcus, staphylococcus, gonococcus, pneumococcus, anthrax bacillus, typhoid bacillus, etc., having been cleared up by this means. Where no organism is found the negative results may be of considerable value. The technique is simple, and in such cases as mentioned, the usefulness of the procedure warrants its being more frequently resorted to than it is at present. For the rational treatment of septicæmias by specific serums, its employment becomes a necessity.

In anthrax, an early diagnosis may readily be made by demon-