

tannic acid in effecting the objects already mentioned has received abundant clinical proof in the treatment of intestinal catarrh accompanied with fermentation and true specific dysentery. If the injections of tannic acid prove too irritating, then the addition to the injection of about one litre of oil is of advantage. In typhoid fever these injections are of great value; meteorism and diarrhoea disappear, and the entire course of the disease is favorably influenced. In the incipency of this disease, it is possible by injections of tannic acid to abort it. Cantani has also secured an abortive action in the beginning of typhoid with injections containing one gramme of the hydrochlorate of quinine, and from ten to fifty grammes of pure caruolic acid in two litres of cold water.—*Med. Rec.*

**THE PROPHYLAXIS OF DIPHTHERIA.**—At the recent International Congress the subject of the measures to be taken in averting the spread of diphtheria was discussed in the section of hygiene. An admirable survey of the subject was given by Professor Löffler of Griefswald, whose researches upon the diphtheria bacillus are so well-known. The paper concluded with several propositions (*Berliner Klin. Wochens.*, No. 40), which may be briefly summarized. The cause of diphtheria is held to be a bacillus, which contained in the exudation on the affected mucous membranes, is liable to be disseminated in the vicinity of the patient, together with particles of the false membrane. The infectivity of the patient may even persist for a few days after all traces of diphtheritic exudation has disappeared. The strictest isolation of cases is necessary; and children who have suffered from the disease should be kept from school for at least four weeks. The bacilli have been found to retain their vitality in dry membranes for from four to five months. It is therefore essential that all clothing, bed linen, and utensils likely to have been contaminated should be disinfected, either by boiling or by exposure to steam. The room occupied by the patient should be disinfected by washing the floors with warm sublimate solution (1 in 1000), and cleansing the walls and furniture with bread. It is uncertain how long the bacilli may exist in the moist state, but it seems probable that moisture is more favorable to their vitality than dryness. Thus, diphtheria would seem to be favored by the dampness of dwellings, and also by absence of light. These organisms can exist outside the body at a temperature of 20° C., and they develop well in milk. The sale of this commodity should therefore be carefully supervised. An important statement is that which asserts that the diseases affecting pigeons, fowls, calves and pigs, which resemble diphtheria, are not caused by the bacillus of human diphtheria. These diseases in the lower animals are not

therefore, to be feared as sources of the human affection. Professor Löffler thinks that the etiological identity shown by Klein to exist between diphtheria in cats and in man requires confirmation. Although lesions of mucous membranes favor the retention of the virus, yet in disposed subjects the disease may arise apart from such lesions. It is advised that when diphtheria is prevalent a systematic use of disinfectant gargles and washes (e.g., sublimate solution, 1 in 10,000) should be enforced on all children. Lastly, it is stated that the meteorological conditions which favor the spread of the disease are still unknown.—*Lancet.*

**TREATMENT OF TYPHOID FEVER.**—Irvin, in the *American Practitioner and News*, contributes a paper on typhoid fever, the summary to which we quote as an example of the extreme slowness with which new ideas penetrate the professional mind. Scarcely one of his propositions is tenable, and the resort to opium for every emergency reads like one of the "Tales of a Grandfather." We quote:

1. There is no medical treatment for an uncomplicated case of typhoid fever.
2. Diet and stimulants carefully regulated to suit the case, and good nursing, fulfil all the indications.
3. The fever is best controlled by frequent sponge baths of tepid water and alcohol, and the internal use of stimulants and opium.
4. Feeble heart and prostration from hemorrhage or diarrhoea are relieved by opium, stimulants, belladonna, and oxygen gas.
5. Pneumonitis and bronchitis are not influenced by special medication. Food and stimulants, with opium to relieve cough and pain, and quinine in tonic doses may be given.
6. Hemorrhage of the bowels requires the free internal use of opium only.
7. Perforation of the bowels is only successfully treated by the use of opium.
8. Peritonitis requires the use of opium in repeated doses.
9. Tympanites is most successfully relieved by the use of opium internally three or four times daily, with turpentine applied to the abdomen.
10. Diarrhoea is controlled by opium and the regulation of food.
11. Insomnia yields best to the use of opium; where this drug is not well borne codeine paraldehyde or urethan may be given.
12. Nephritis should be poulticed locally and opium given internally to relieve pain.
13. Constipation is best relieved by mild laxatives and enemata.

Retention of urine requires the use of the catheter only.—*Times and Reg.*