

direction. Several have had rheumatic pains, but no other symptoms showed themselves, not even an abscess, and their absence was probably due to the great care used in the manufacture of the serum administered.

During the past year there have been one hundred and eleven cases of diphtheria in Harper Hospital, five of which died. Three of these entered moribund, and one man had been sick six days before entering the hospital and the action of the toxins upon his heart centres was so great that he died from heart failure, the result of the diphtheritic poison. Some cases where large doses of antitoxin were used close together showed sub-normal temperature for several days. There have been six tracheotomies and twelve intubations. There have been many laryngeal cases that were treated successfully with merely antitoxin and inhalations. The youngest case was a child of five weeks, bottle-fed. During the months of October, November and December there were over seventy cases in the hospital under my care, and six in private practice.

The nurses who were on duty were at first immunized with 250 units, later with 500 units, and still later with 1,000 units, as the prophylactic effect was better. The nurses were constantly, except when off duty, exposed in an atmosphere saturated with diphtheria. Two nurses took the disease after having been immunized, and one took diphtheria after nursing a man who started with a "follicular tonsillitis," but which later turned to a true diphtheria. All the nurses recovered. When the disease was taken by those who had been immunized the attacks were mild.

Too much praise can not be given to the corps of nurses who cared for the patients day and night, with promptness, cheerfulness and efficient vigilance. Had it not been for their splendid work, many of the patients would have succumbed to the disease.

In all the hospital cases the patients had been sick from two to three days before entering, hence it was necessary to use the strongest antitoxin serum early and repeat the dose in six, twelve or twenty-four hours, if the growth of the membrane was not checked or stenosis promptly relieved.

We have several standing orders that patients receive as soon as they reach the hospital, for we believe in using some medicines that proved useful before the discovery of the antitoxin.

An examination of throat is made to see the extent and location of the membrane.

1. A hypodermic of antitoxin 1,500 or 1,000 units.
2. A liberal dose of calomel if tongue was coated and bowels constipated.