geal cases recorded in private practice, in 691 cases no operation was performed; of these cases 563 recovered, giving a mortality rate of 18.5%. Of these fatal cases 48 died of laryngeal obstruction, operation being either refused by patient (2) parent, or else neglected; and not from the laryngeal disease.

Of the 565 laryngeal cases operated upon, 533 were intubated and 32 tracheotomized. In the former there were 138 deaths (25.9 per cent); in the later 12 deaths a death rate of 37.4 per cent. But of these deaths 66 were either incribund or died within 24 hours of operation, and excluding those we have 499 cases with 84 deaths—16.9%. Let us compare the results of these operation cases plus the serum, with the results preceding the use of the antitoxin. In 1892 McNaughton and Craddren published records of 5,546 cases of diphtheria in which intubation had been performed in private practice with a death rate of 69.5 per cent. Later statistics have improved this somewhat, e.g. these of Brown—279 cases intubated with a death rate of 51.6 per cent. These figures compared with those of the Society's report speak truly most convincingly for the use of the serum.

With regard to paralysis the report of the committee is not decisive as to any relation between its frequency and the use of the serum. In the 3,384 cases in private practice, paralysis occurred in 328 cases, i.e., 9.7 per cent. Lennox Brown's series of 1,000 cases of diphtheria was followed in 14 per cent of cases with paralysis. Saune in 2,448 cases noted paralysis in 11%.

Broncho-pneumonia was much less frequent under the use of the antitoxin than by any previous treatment, and was distinctly less in these private cases than the record of it in hospital statistics. It was present in 193 of the 3,384 cases, i.e. 5.9%, and was the actual cause of death in 54 cases.

In looking over the actual causes of death in the fatal cases reported to the Society we find that of 350 deaths which can be analyzed, 105 are reported as dying of Sepsis, 54 of Broncho-pneumonia, 53 of Cardiac paralysis, 48 of laryngeal obstruction, 15 of Nephritis, 11 of Bronchitis and Tracheitis, 6 of respiratory or general paralysis, and 12 by complication with other exanthems. In the term Sepsis is included not only streptococcic and staphylococcic invasion of the blood, but toxemia from absorption of the products of the diphtheritic membranes.

On the adoption of the report by the Society it was decided to recommend in regard to (1) Dosage. For a child over two years the dosage of antitoxin should be in all laryngeal cases with stenosis,