

that a combination of the first three gave most general relief. The drugs were employed in the dosage of six, four, and two grains respectively, and the combination was given four times daily at the outset, in most cases thereafter. The further treatment is expectant or symptomatic, but much may be done to relieve the troublesome symptoms and to combat the complications.

The distressing and troublesome cough always offers a serious problem for the physician. As this commonly arises from catarrh of the whole of the upper respiratory tract, local measures are often beneficial, and undoubtedly the application of antiphlogistine, or the homely poultice of linseed, alone or with mustard, to the upper chest or throat gives great relief in many cases. This, combined with the use of a spray of chloretone and menthol (of each 2 per cent.) in liquid paraffin, to the pharynx, was very successful. This spray proved much more beneficial than the well-known combination of menthol, eucalyptus, and benzoin.

*Vomiting* may call for special treatment, and, indeed, may be so severe as to call for absolute rest to the stomach, and rectal feeding. Tincture of iodine (1 minim in 1 ounce of water) given every hour for six hours proved successful in some cases, but not in others. The combination of bismuth, soda, and dilute hydrocyanic acid (2 minim doses) was often useful. Blistering over the epigastrium was resorted to in some cases, but at times all these measures failed, and only ice by the mouth, with rectal salines, or rectal alimentation was employed for a short period.

*Sleeplessness* is always difficult to deal with in febrile diseases, but in influenza it is particularly so. Ordinary general measures fail, and drugs are required to secure sleep, more especially in those cases with pulmonary complications. As most of the drugs at our disposal for such a purpose are depressant and prejudicial to the heart, a selection is difficult. In the earlier stages, even where pulmonary complications appear imminent, a small dose of morphia may often be tried without grave danger, but it should never be employed unless in the early stages. The members of the trional group are all too depressant, and hyoscine seems to give such variable results as to render it unreliable. Paraldehyde in drachm doses, repeated if necessary, is always useful, though unpleasant, but, as a standby in all cases, even in those with pulmonary complications, I used the ordinary combination of chloralhydrate (gr. xx) with ammonium bromide (gr. xxx). It certainly is less dangerous, can be repeated, if necessary, and on the whole proved most reliable.

*Hyperpyrexia*, when present, calls for prompt and efficient action. In this condition, antipyretic or febrifuge drugs should be avoided, and some form of hydrotherapy should be employed. Fortunately, thorough and systematic tepid sponging in many cases gives relief, but recourse to