

with its deteriorating influences on the general health of the inmates, and to look after the source of the case in the persons of friends, attendants, and help. A family with children ought to insist upon the occasional inspection of the throats of their servants; those with chronic pharyngeal catarrh should not be hired. A seamstress or laundress coming for an occasional day's work, sick-nurses, children's nurses, and cooks ought to be examined from time to time, the more so the more such people are inclined to conceal slight troubles, for obvious reasons. The opportunities for infection are so numerous that it is impossible to sail absolutely free from it. It is easy to imagine how many cases of diphtheria are liable to be disseminated by teachers, shopkeepers, restaurants barbers and hair-dressers.

In times of an epidemic every public place, theatre, ball-room, dining-hall, and tavern ought to be treated like a hospital. Where there is a large conflux of people there are certainly many who carry the disease. Disinfection ought to be enforced at regular intervals. In this respect I can but repeat what I said in my treatise (p. 172) and Peppe's "System of Medicine" (i. p. 697). Public vehicles must be treated in the same manner after a suspicious person has been carried; that it should be so when one with small-pox has happened to be conveyed in them appears quite natural. Livery-stable keepers who would be anxious to destroy the germ of small-pox in their coaches must learn that diphtheria is as dangerous a passenger as variola: and what is correct in the case of a poor hack is more so in a railroad car, whether emigrant or Pullman. I have many patients coming to and leaving the city in them. They ought to be thoroughly disinfected in times of an epidemic at regular intervals, for the high-roads of travel have always been those of epidemic diseases. Still, can that be accomplished? Will not railroad companies resist a plan of regular disinfections because of their expensiveness? Will there not be an outcry against this despotic violation of the rights of the citizen, the independence of the money-bag? Certainly there will be, exactly as there was when municipal authority commenced to compel parents to keep their children from school when they had contagious diseases in their families, and when small-pox patients were arrested because of their endangering the passengers in a public vehicle, or taken to a fever hospital for the protection of their

neighbors. In such cases it is not society or the State that tyrannizes over the individual; it is the individual that endangers society.

To what extent the infecting substance may cling to surroundings is best shown by the cases of diphtheria springing up in premises which had not seen diphtheria for a long time, but had not been interfered with; and best, perhaps, by a series of observations of self-infection. When a diphtheritic patient has been in a room for some time, the room, bedding, curtains and carpets are infected. The child is getting better, has a new attack, may again improve, and is again stricken down. Thus I have seen them die; but also improve immediately after being removed from that room or house. If barely possible, a child with diphtheria ought to change its room and bed every few days...

Prevention can accomplish a great deal for the individual. Diphtheria will, as a rule, not attack a healthy integument, be this cutis or mucous membrane. The best preventive is, therefore, to keep the mucous membrane in a healthy condition. Catarrh of the mouth, pharynx and nose must be treated in time... During an epidemic operations in the mouth, even to extracting teeth, ought to be postponed: as they are liable to be followed by diphtheritic lesions within a day or two.

For its salutary effect on the mucous membrane of the mouth, chlorate of potassium or of sodium, which is still maintained by some to be a specific, or almost one, is counted by me among the preventive remedies. If it is anything more, it is in a case of diphtheria an adjuvant. It exhibits its best effects in the catarrhal and ulcerous condition of the oral cavity. In diphtheria it keeps the mucous membrane in a healthy condition or restores it to health. Thus it prevents the diphtheritic process from spreading.

Diphtheria is seldom observed on healthy or apparently healthy tissue. The false membrane is mostly surrounded by a sore, hyperæmic, œdematous mucous membrane. Indeed, this hyperæmia precedes the appearance of the diphtheritic exudation in almost every case.

Dr. Jacobi, among other remedies for cure, advises inhalation of steam. Water is to be kept constantly boiling in the room, and every hour a teaspoonful of oil of turpentine, and "perhaps also a teaspoonful of carbolic acid," is to be poured on the water and evaporated. Every practicing physician should read this valuable paper, in which Dr. Jacobi enters fully into the best treatment of the disease.