

taken for granted. Without further details as to the culture medium employed and the methods adopted to secure a constant strength, it is regarded as quite certain that would-be imitators have a long and arduous research in front of them before they can venture to experiment on man. It is surmised that these details will be, in the meantime, withheld. Great preparations are being made for the manufacture of the lymph *en gros*. Special large incubating chambers, adapted to the peculiarities of the tubercle bacillus, are being made, and thousands of small Ertenmayer flasks have been ordered.

It was expected that Koch might make his announcement last night at the Medical Society, and that some one would take up the cudgels for the Koch cure in opposition to Virchow. The large hall was crowded in consequence, but comparatively little of interest took place. Guttmann spoke of the favorable aspect of affairs at the Moabit, and undoubtedly made the greatest impression of the various speakers. Bernhard Frankel also defended the treatment and exhibited some cures, but Albert Frankel narrated a depressing case of a patient with apical affection on both sides, who in the course of treatment improved, as far as the lungs were concerned, but acquired a very serious tuberculosis of the tongue, which Frankel did not hesitate to describe as metastatic and subsequent to the treatment. Psaginsky brought forward a somewhat similar case of a young woman who had acquired lupus of the nose through using her consumptive sister's handkerchief. For nine years the affection has been distinctly local, but in the course of treatment tubercular patches appeared on the left tonsil.

It is obvious that such complications are not necessarily ascribable to the treatment, but the attitude of these speakers seemed to be unfavorable to Koch. Virchow had some more pathological material of the character which he exhibited last Wednesday, but he also showed the lungs of a case of catarrhal pneumonia of the same character as he had previously been inclined to attribute to the injection, but which had not been subjected to the Koch treatment, and so he was obliged to retire partly from his position in this respect.

I trust you have safely received the very large consignment of lymph which I sent you on

Saturday, and that as favorable results may be obtained with it in Toronto as here in the Moabit.

Selections.

TETANOID CONVULSIONS IN AN INFANT; OPERATION: RECOVERY.

BY T. R. RONALDSON, M.B., F.R.C.P. ED.

The child whose case forms the subject of this short paper was born on the 8th of Dec., 1886. He was a strong, well-nourished boy, above the average size and weight, and the third child. The labor was easy and normal in every way. The umbilical cord was unusually thick, from an excessive development of Wharton's jelly. The mother nursed the child from the beginning, and continued to do so until the usual time for weaning, no other food than her milk being required.

After my visit on the 17th December, when the child was nine days old, it was first noticed that there was something wrong. At times the child cried and was restless, the left eye winked, the muscles of the left side of the face twitched, and the left side of the tongue swelled up in marked contradistinction to the right side. These symptoms began so slightly and progressed so quietly that the mother and a most intelligent nurse did not think it necessary to send for me until the 19th, two days after the onset of the illness. Having been informed of the nature of the attack, and knowing how healthy the child was, and that the umbilical cord had not separated although it was the eleventh day, I began to connect the case, as I proceeded to pay my visit, with those cases of tetanus we read of as occurring so frequently among babies in certain countries, and whose starting-point seems to be the neglected or badly taken care of umbilicus. On my visit I saw no reason to doubt the accuracy of the opinion I had formed. The child was, apart from the convulsions, the picture of health, well-nourished, with digestion perfect, and with evacuations natural in quantity, quality, and frequency. The anterior fontanelle was somewhat fuller than usual, but that was entirely from the exceptionally well-nourished condition of the child. The temperature was normal,