during most. if not all, of the illness as capable of thought as it is at this moment. While I did not suffer from hunger in the sense of having an appetite, I was continually conscious of the fact that I was underfed, and I also knew that even when in health I could not take large quantities of milk with good results. When it came to the ingestion of considerable amounts of what might be called "hospital milk," I felt that I was receiving little more than water, and many hours of thought convinced me that on the one hand I was being attacked by the bacillus of Eberth, and that on the other my powers of vital resistance were being reduced by partial starvation.

Immediately after this I began giving those cases of typhoid fever which came under my care a varied diet of liquid and semi-solids, and since that time I have been greatly impressed at each term of hospital service by the advantages of this method of feeding. We must recollect that the average adult requires at least 2.500 calories a day for normal existence, and as each quart of milk represents only about 500 to 600 calories, it is evident that for a patient to receive the total number of calories required for the maintenance of his body he must drink not less than four and a half quarts of milk a day. These facts further impress us with the utter inadequacy of the pure milk diet in this disease. Nor can we help appreciating the fact that we are overloading the organs of absorption and climination with an excess of fluid, which certainly cannot be advantageous, although, of course, an excess of liquid in typhoid fever is preferable to a lack of it.

Again, I can see nothing in the clinical history or pathology of this disease which in any way justifies us in disordering metabolism by the institution of a rigid single diet; and I doubt if there is a man in my audience who can go to bed for a period of a month or six weeks and receive an absolute milk diet for that period of time without emerging very much the worse for wear.

It is my custom to give all patients after the first week of typhoid from one to two soft-boiled eggs a day in addition to the ordinary allowance of milk, and to vary their diet by the use of curds and whey, rice which has been boiled to a pulp, barley, wheat, and oatmeal gruel, and a cup of corn-starch with vanilla or some other flavoring substance of a like character. As a result I very rarely see the marked ataxia which is so common a symptom in convalescence from typhoid fever. The patient's nutrition is so well preserved that he is but little more emaciated than many cases of acute pneumonia at the time of recovery. Secondary complications like furuncles and bedsores are unknown, for by the use of a plentiful supply of food the patient's vital resistance is maintained to such a degree that simultaneous collateral infections do not take place. The