not make her appearance again for about two months, when she said she thought it was about time to have a little more of the medicine. I may mention in passing that the first medicine was sufficient only to cover the first ten days, and the patient seemed greatly disappointed that she was compelled to return.

So many children are so promptly benefited by the use of a small quantity of iron, that it is a great drawback to us that no palatable preparation has been discovered and put on the market. I have in mind a little fellow who has long been very much averse to eating meat, due I presume to defective digestion; but for the past few weeks, since he has been taking the levulose ferride, he seems quite content to eat meat alone, and is becoming strong and robust. Not long ago I had a visit from a lady, who brought with her a young lad, aged fourteen, who had a most forbiding cadaveric expression, and he could eat no meat. His brother, I was told, had died at about this age from Bright's disease, and this one presented all the symptoms peculiar to the brother who died. Still, with attention to diet, out-door exercise in the country. and a tablet triturate containing three grains of levulose ferride after meals, he made a prompt recovery. Although I was unable to discover any symptoms of Bright's in this instance, I was impressed with the impression due to the anæmic condition; and yet without some readily assimilable iron preparation it would have been a tedious process to start him on the way toward recovery.

Late in the spring of the year, a gentleman, aged about thirty-five, called on me complaining of dyspepsia, although he had been under the treatment of another physician for overwork for four preceding years. After regulating his diet, and adopting treatment calculated to restore the activity of the digestive apparatus, he was placed upon levulose ferride along with strychnine sulphate —three grains of the former in tablet form, and one-sixtieth grain of the latter, and did remarkably well on this combination. This product, like all other mild preparations of iron, is mostly indicated in cases of this class, and along with these may be mentioned chorea, convalescence from lingering diseases, like typhoid fever and in all such instances, I venture to anticipate that the results will be especially favorable where proper attention is given to dietetic measures.

The administration of the remedy may be confined to the use of the powder, which is taken dry on the tongue, disssolved in water or coffee; or it will be found more convenient in the form of tablets, each containing three or five grains. The dose for children ranges from three to ten grains, and for adults from five to thirty grains.

TOPICAL TREATMENT OF DIPHTHERIA AND CROUP.

By B. M. Behrens, M. D. of Chicago.

In presenting this paper I wish it accepted as an argument in favor of an exclusively topical treatment possessing the aim of destroying the diphtheritic infiltration wherever it is found.

It will be agreed to by the medical fraternity that we have heard all we wish to hear about the general treatment of diphtheria and croup, and in spite of all assertions to the contrary, there is not one honest physician bold enough to proclaim this or that pet remedy as infallible. Whether it be given internally, or locally as gargle, vapor or spray, it is sure to fail, except in cases of slight extent of infection, or in cases where Mother Nature herself succeeds in expelling the disease—but this is a complete failure so far as the efficacy of the remedy is concerned. There are, perhaps, physicians who still hold to the old creed, that diphtheria is a constitutional disease, with secondary local manifestations in the throat, and therefore they adhere to their pet remedy as being superior to all others; but in the minds of those who hold the other view, that diphtheria is primarily a local disease, and the constitutional symptoms secondary, it is evident that the present mode of treating it is inadequate. It is therefore, in my estimation —and my opinion is entertained by many— a Utopian dream to suppose that a remedy ever will be discovered whose specific action is of such a nature that it will check or counteract the production of toxic material or prevent its absorption. By this I mean a remedy of a chemical nature, and not one which may be discovered by bacteriology. Periodicals, and even the newspapers, are filled with "sure cures for diphtheria," that are tried to-day, to be laid aside to-morrow as sadly wanting. For, what can we expect but increased filth from remedies, taken internally or applied as gargles, sprays, and the like, the action of which on the diphtheritic plague can never be more than superficial? Whoever believes in any further effects is the victim of self-delusion, or of gross ignorance of the characteristics of the disease. And even if we must allow, to sprays at least, some mechanical effect—for instance, on the superficial layer of the diphtheritic infiltration—is it not more than likely that these will have no effect on infiltrations hid away in the deep pouches of the tonsils, or back of them? Besides, the danger lies not in the superficial layer of the infiltration, as we see it, as this contains only epithelium, pus cells and detritus, but in the deep layer of the mucous membrane, where absorption of the toxic products takes place, and the diphtheritic bacilli multiply. For this reason and because as a usual thing the fauces are first attacked by the diphtheritic infection, what is demanded of us is the complete destruction of the infiltration