

luck, amidst their misfortune, it was to be under the guidance of people who stoutly refused to bromodize their charge. That epilepsy itself, without the agency of brain sedatives, does not rapidly deteriorate who do intellectual work and whose capacity for real work remains at par in the ratio to their abstinence from bromide. In connection with this one might mention well-known historical epileptics such as Nero, Caesar, Mohammed, Napoleon and others.

When a remedy is found that will reduce the number and severity of seizures, arrest attacks and gradually increase the length of spell-free intervals and do all this without in any manner impairing the mental or physical condition of the patient, then may we rightly assume to have entered the gateway which will ultimately lead to complete recovery from epilepsy. The new serum treatment for epilepsy, to which I desire to call attention, contemplates just such programme, and we shall see how far it has progressed.

A new therapeusis, the production of a anti-epileptic serum, could naturally follow only in the wake of a new pathology of epilepsy. It became evident that the present-day views of etiology and pathology of epilepsy were untenable, that our present-day theories do not harmonize with certain phenomena as elicited in carefully-selected and treated cases with the new serum.

The metabolism of the epileptic is pathological, as is evidenced by the fact that waste and food products are converted into epileptogenic toxins instead of being disposed of in the manner incidental to a normal non-epileptic metabolism. The appearance of septic infection in an epileptic results in an increase of epileptic condition, either in point of severity or frequency. This is due to the epileptic attractive principle of the epileptic's blood, which means that the blood possesses a specific affinity, a characteristic action of utilizing products of metabolism for the production of epileptogenic toxins, absorbing and retaining the same.

The intestinal flora furnishes a very important source of supply for the converting of septic material into toxins. Epileptogenic toxins are thus manufactured and absorbed into the blood stream where they accumulate. In turn these toxins circulate through the system, poison the brain centres and under symptoms of toxicity, autointoxication, give rise to confusion, mental derangement, paralysis, convulsions, epilepsy. Patients who commit gross errors of diet and in other ways cause intestinal irritation or sepsis, experience, as a rule, increased epileptic manifestations. Convulsions due to gastric irritation, in non-epileptics are not uncommon. The occurrence of intestinal fermentation and putrefaction, often accompanied by great abdominal disten-