is due, doubtless, to the severity of some cases included; and it is to be remembered that the delirium of to-day is generally little more than mental wandering. The series makes, therefore, no marked distinction in favor of any form of treatment, save that in the bath treatment there are more cases of hæmorrhage and neuritis, and fewer of bronchitis, whereas, in the antipyretic treatment, hæmorrhage is comparatively infrequent, and bronchitis moderately frequent. It is difficult to understand why any course of treatment should predispose to bronchitis, and it is likely that the differences are due to season and climate.

DIET.—In mose cases strictly liquid diet is given, though in a considerable number of cases, custard, poached egg, and other semi-solids are given even from the first week of the disease. The day on which this kind of food was earliest given is noted in 381 cases. In 73 this was after five weeks, and in 92 it was after defervescence, leaving 216 in which semi-solids were given during the disease before normal temperature was reached. In these 216 cases, there occurred at different times the following:—

| Hæmorrhage12           | times (once immediately | after | ingestion.) |
|------------------------|-------------------------|-------|-------------|
| Perioration 7          | 44                      |       |             |
| Relapse 9              | **                      |       |             |
| Intercurrent relapse11 | 44                      |       |             |
| Recrudescence20        | 46                      |       |             |

These figures are all less than the proportionate numbers in the whole series, but it is to be remembered that the slighter cases only are allowed semi-solids. The following facts, too, must be regarded before a decision is made. Of 72 cases in which homorrhage occurred, the time of giving semi-solids was noted in 31; in 12 of these, semi-solid food was given previous to the occurrence of homorrhages. In 43 perforations the day of giving semi-solids is noted in 7; in all 7 it was given before perforation.

Its Effect upon the Duration of Disease.—The average duration of 185 moderately uncomplicated cases was 23.6 days; semi-solid food was given in the first fourteen days and in 125 cases, of which 40 ran a course of twenty-one days or less, 47 ran from twenty-one to twenty-eight days, and 36 over twenty-eight days. Sixty-three cases in which semi-solids were given in the first 9 days averaged 27 days. When observing the results of semi-solid food it must not be forgotten that milk, if it becomes curdled in the stomach, is practically a semi-solid.

The question of food is a vexed one and no rule will apply to all cases; it may be said that any food which reaches the seat of disease in any other than perfectly fluid form is bad.