

able. The only drug which seems to have any marked effect is arsenic, which must be given in increasing doses to the limit of toleration. Owing to the gastro-intestinal features of this disease arsenic is often not well tolerated, and its use by the mouth, where such symptoms are marked, must be avoided as more harm than good will be found to follow. Occasionally, but not generally, iron will be found beneficial and should always be tried. Red marrow, etc. is occasionally valuable. Other indications must be met as they arise, as there is no specific treatment for this affection.

Extracts from Blood Examination in Three Cases of Pernicious Anaemia.

Case & Date.	Red Blood Cell Count.	Haemoglobin.	Leucocytes.	Character of Red Cells and Remarks.
(1) W. S. Apl. 1, 1897	1,216,000	30	5000	Marked poikilocytosis. Macrocytes quite numerous; a few microcytes. Many megaloblasts and an occasional normoblast present.
Dec. 13, 1897	1,440,000	43	8000	Moderate poikilocytosis—otherwise features as before. Examination made shortly after relapse following a period of marked improvement.
Feb. 24, 1898	952,000	17		Very marked poikilocytosis, etc. Megaloblasts very rare. Death Mar. 19th.
(2) Mrs. R. May 25, 1898.	3,500,000	55	9000	Slight poikilocytosis, numerous microcytes and a few macrocytes. No nucleated discs. (This reading shows the character of a secondary anaemia.
Sep. 20, 1898.	1,185,000	28		Marked poikilocytosis, many macrocytes & megaloblasts.
Dec. 16, 1898.	850,000	22		Very marked poikilocytosis. Many macrocytes, but nucleated forms were not noted. Death within 30 days.
(3) J. R. May 3, 1902.	1,226,000	25	4000	Marked poikilocytosis, many macrocytes, a few microcytes, frequent megaloblasts & an occasional normoblast.
	1,100,000	22		Ditto; apart from an absence of nucleated forms in the 6 films examined. Death on June 16.

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