Case No. 3.-Aged about 5 years; well-defined membrane covering both tonsils extending to arctus on both sides. The patient had been under treatment for five days, during which time the membrane had but slightly disappeared, only to re-form again in a few hours; temperature, 101'; laryngeal symptoms present for about four days. Injected 25 min. antitoxine on right side of abdomen. December 14th, twelve hours since injection, appears much brighter and is even cheerful, and rested well all night; only shreds of membrane can be seen; muco-pus in pharynx previously abundant has disappeared entirely; marked decline of laryngeal symptoms. Twenty-four hours after injection fauces are practically normal, without a trace of membrane; temperature, 100°; some laryngeal symptoms still present, and to prevent further possible invasion, injected second dose of antitoxine, 25 min. December 15th, temperature 99°; enlarged cervical glands have entirely disappeared, and fauces present a normal appearance. December 16th, temperature normal; slight laryngeal symptoms still present, but disappearing; otherwise quite well.

Case No. 4.-Aged over 50 years. Has had diphtheria for four days and membrane slowly disappeared from local applications and internal remedies, but re-formed on the fifth day by the appearance of two membranes, one on left tonsil and the other close by on anterior arch, accompanied by further enlargement of sub-maxillary and cervical glands. December 13th, temperature 1013'. Patient having shown some antipathy to "horse medicine," and expressing herself in favor of continuing in "the good old way," the treatment was continued for another twelve hours. with no abatement in size of membranes. twelve hours' reflection she became a convert to the "untried," and consented to abandon "the good old way," when 25 min. antitoxine were injected, and all former treatment, except mouthwash, discontinued. December 15th, twentyfour hours since injection, both membranes have disappeared by about one-half; temperature, 99°. December 16th, temperature normal; no membrane to be seen, but mucous membrane is pale where diphtheria patch had existed; enlarged cervical glands have entirely disappeared.

Case No. 5.—Aged about 15 years. December 13th, there is a well-defined membrane over both fauces, which was only slightly formed yesterday; some difficulty in swallowing; sub-maxillary glands enlarged on both sides; temperature, 100go; injected 25 min. antitoxine on right side of abdomen. December 14th, twelve hours since injection, temperature 100°; patient says she does not feel so ill, and looks brighter and apparently more cheerful; membrane is considerably less, but has not disappeared. Twenty-two hours after injection there is no membrane, but surface looks pale where membrane had existed and fauces at other parts, and also pharynx looks more normal, but still highly congested—of a livid color. Gave another injection of antitoxine, 25 min., on left side, having some doubt about appearance of throat, lest membrane might reappear on such a livid surface. December 15th, temperature 99°; no trace of membrane nor pale surface where membrane had existed: fauces are still too much of a venous hue: glands still enlarged, but diminishing. December 16th, temperature 984°; fauces normal; enlarged glands barely perceptible. December temperature 991°; enlarged glands perceptible. December 18th, temperature normal, fauces likewise; enlarged glands not perceptible, otherwise quite well. She suffered such severe pain in region of injections that she remained awake both nights.

Case No. 6.—Aged about 13 years. The course, duration and treatment of this case being practically identical with No. 5, may be considered its counterpart, as the notes made are almost identical.

One injection of 25 min. of antitoxine for each child was used on three children exposed to diphtheria in the same house. They did not contract the disease, but their immunity does not enable one to draw any definite conclusions.

The mouth wash referred to, and which was used in all of the cases related, was composed of soda and borax, each 30 grains; carbolic acid, 15 min.; glycerine, 4 ounces to a pint. It was prescribed chiefly to free the mouth of mucus, and wash away particles of broken down membrane. It might be well to state that while the above were well-defined cases of diphtheria, they were not of a severe type, at least they had not become so up-