

so. On the contrary, erysipelas is one of the few diseases for which I now believe we have a certain and unfailing remedy, and this whether it is infantile or adult, idiopathic or traumatic."

The remedy must be given in full quantity and frequency which I have recommended in order to produce its beneficial effect in the severer forms of the disease; and if any one expects to accomplish this desirable object by the use of the tincture of the perchloride of iron, either in erysipelas or any of the other diseases referred to in this paper, they will be disappointed, as such is the result of my experience both in erysipelas and diphtheria. Two illustrations may here suffice. I hold that a material difference exists between the effects of the two so-called similar preparations of iron—viz., the muriate and, perchloride—both of which I have fully tested, and could give many instances of their marked therapeutic difference. In regard to erysipelas, I was attending a lady who was severely affected by it after a tedious attack of rheumatic fever. I ordered her to have thirty drops of the tincture of the muriate of iron every two hours; but to my great disappointment I found that she went on day after day without any improvement. I then asked to see the medicine she was taking, when I discovered it was the tincture of the perchloride, sent by mistake by the chemist. I immediately changed the medicine for the tincture of the muriate of iron and in a few days the disease disappeared.

I was requested a short time ago to attend a young lady suffering under a severe attack of diphtheria. She had been taking for some time the tincture of the perchloride of iron, with little apparent benefit, as her pulse was 110, and her throat covered with diphtheritic membrane. She was put on the tincture of the muriate of iron, and had her throat swabbed with a solution of Condy's fluid several times a day. The membranous deposit rapidly disappeared, and the pulse in two days fell to 80, and in the course of a week she was quite convalescent.

In conclusion, I have again to state, in regard to the treatment of erysipelas with the tincture of muriate of iron, that I have the most perfect reliance on it; and that when it has failed, the fault has been not in the remedy, but in the mode of administering it. I hold that no one is justified in condemning it until they have given it as recommended, and found it fail in effecting a cure in uncomplicated cases. Of course, I admit there are cases complicated with other virulent diseases, in which no human aid can be of any avail; or it may not have been had recourse to until after the system has fairly succumbed to the disease. Such cases must form an exception. In short, if any remedy is entitled to be called a specific, it is so; at all events, as much so as quinine is in ague.—*Edinburgh Medical Journal*, August, 1876, p. 98.

ON THE OPEN AIR TREATMENT OF CONSUMPTION

By DR. JAMES BLAKE, San Francisco, California.

An article in the *British Medical Journal* for October 24th, 1874, recalls an intention I have had for some time of sending a communication on the open air treatment of consumption, a plan I have advocated for many years, both on the grounds to which Dr. Marcet alludes as to its being a septicæmia, and also on account of the advantages which such a treatment offers for improving the digestive organs. In a paper published in the *San Francisco Medical and Surgical Journal* in 1860, I pointed out the advantages to be derived to the digestive functions by living in the open air; but looking at the septicæmic element of the disease, no other treatment, it appears to me, can so effectually combat it as living in the open air, the only condition in which a patient with diseased lungs can avoid re-breathing the poisoned air he has expired, laden with the germs for intensifying the putrefactive processes going on in his lungs. There is undoubtedly a germ of truth in the theory of Dr. MacCormac of Belfast, that the chief cause of consumption is re-breathed air, but not, I think, from its being overcharged with carbon, as he supposes, but because it is loaded with a much more subtle poison in the putrefactive germs which it contains. Some twelve years ago, I published some cases in the *American Journal of Medical Science*, showing how many cases of consumption had been arrested, and some cured, by what I called the open air treatment of the disease; and a longer experience has convinced me that this method offers the best chance for our consumptive patients. But, before the profession can be induced to employ it, I am aware that an accumulated mass of prejudice has to be removed, not only amongst physicians, but more particularly amongst the public, as regards the evil of exposure and living in the open air. The idea of advising a patient in the third stage of consumption, suffering from cough and night-sweats, to sleep in the open air, is a proposition which in England, I am aware, would be considered not only as dangerous, but almost as a sign of lunacy. Even here, where it is no very uncommon thing for persons to sleep out of doors, and where the dewless nights of our mountain ranges during our rainless summers render any covering but blankets and a tree quite superfluous, I often met with objections to following such a course. And yet I am convinced that it is the best method that we possess for arresting and curing consumption. In England possibly, and in fact in most parts of Europe, the occasional summer rains and the absence of dry mountain ranges, with their pine-covered ridges, offer obstacles to such a treatment being fully carried out; but the principle once recognised, a great deal may be done even there towards employing it. In order, if possi-