

The doctor removed these patches or parts of them with difficulty. He says that the act of removing the patches caused considerable pain. He says that several others in the neighborhood had sore throats similar to his. Patient's gait is very unsteady. He can hardly turn around without support. He noticed this paralysis first about six weeks ago. Two weeks ago, he says, his feet felt like lumps of lead and he was unable to move his toes. The hands are both affected. His grip is not nearly as firm as it was. He has difficulty in the act of dressing or of undressing. He has no pain in either his arms or his legs. Sensation is normal in all of his extremities. Patellar reflex is absent. The paralysis is motor only. The paralysis came on gradually about one month after the attack of tonsillitis. His eye sight was bad just after the attack but is now as good as ever. After his eyes became well, he says, the trouble went to his stomach. It felt numb and just as if needles were sticking into it. He says his stomach feels perfectly well now.

Temperature on admission, 99; next morning and ever since, normal. Urine, normal. Diagnosis, post—diphtheritic paralysis.

Such is the history of this case obtained for me by Messrs. G. H. Bleeker and J. W. Merrill and their diagnosis based upon that history. I need not say that I perfectly agree with them. The case is self-evident. Why then do I think it worth reporting? For two reasons, first, to emphasize the necessity of making an accurate diagnosis of all cases in which there appears a membrane upon the mucous membrane of the throat. This is important both to the patient and to those who may come in contact with him. This case, looking at it in the light of its after history, was evidently one of diphtheria. I fully recognize the difficulty there often is in differentiating tonsillitis from diphtheria and for that very reason I have always felt that it was always safer to treat all doubtful cases as if they were diphtheritic until the doubt could be cleared up by bacteriological examination or otherwise. Such a course entails no hardship upon the patient and protects the friends and others from the danger of contracting the more to be dreaded disease. Secondly I thought this case worthy of being reported on account of