

read at the London Congress, stated that, without acquaintance with his experiments, he arrived, independently, at the same conclusions, from experiments upon rabbits. When the respiratory centre was paralyzed by aconite, the injection of strychnia exercised a most potent influence in restoring the respiration. Clinical observation corroborates this view; and, at the Hospital for Diseases of the Chest, he has found strychnia most useful when the respiration was embarrassed. In acute bronchitis, when the act of expectoration is difficult, it is useful. In chronic bronchitis and emphysema it relieves the labouring respiration, and, when the right ventricle is dilated, adds to the efficacy of digitalis most usefully. In lung consolidation it is also of service; indeed, in all cases where the number of respirations mounts over the ordinary proportion to the beats of the heart (about four to one), it has seemed to me to be of the greatest utility.

MEDICINE.

Typhoid Fever considered as Fecal Intoxication.

Dr. JULES GUÉRIN, of Paris, read a paper on this subject at the London Congress, of which the following is an abstract:—

For a long time the deposits of human excrement were considered to be susceptible to contribute to the development of typhoid fever. This opinion, expressed with a certain character of generality, and, besides, deprived of any serious demonstration, had remained in conflict with all opinions of the same kind. Up to what point was it founded? In what measure, under what form, in what conditions, could the fecal excretions have a share in producing typhoid fever? In order to elucidate, if not to solve, these various questions, the author of this work has given himself up to experiments on animals, and to clinical researches, which have led him to the following conclusions:—

1. The specific diarrhœic matter of those affected with enteric fever, contains at its exit from the body toxic elements resulting from the fermentation of fecal matters, retained and accumulated at the end of the small intestine, behind the ileo-cæcal valve.

2. The organic lesions, considered heretofore as specific signs of typhoid fever, congestion, ulceration of the mucous membrane, alterations of the glands of Brunner, Peyer's patches, and mesenteric glands, are effects of the virulent and ulcerative action of typhoid matters on these parts; and the functional troubles, or general symptoms of the illness, are at the same time the result of the penetration of these same matters into the organism, and of the organic changes which they determine.

3. The complications which present themselves in the course of typhoid fever, under the form of meningitis, pleurisy, pneumonia, and other marked affections, are only more distinct localizations of its poisonous principle, just as those illnesses which begin at the outset with typhoid symptoms, are in themselves nothing but primitive effects of fecal poisoning.

4. Typhoid poison engendered by fecal fermentations, spreads itself incessantly abroad by all the excretory ways of the body, from whence the transmissibility of the illness, and the formation of seats of infection, susceptible of reproducing it in an endemic and epidemic form.

Every one of these propositions has been the object of experiments, and of clinical and anatomo-pathological observations, stated in three memoirs read before the Academy of Science and Medicine in Paris, in the years 1877 and 1878, with proofs to the point. The author will reproduce both before the Fourth

Section of the International Congress, and will accompany them by observations and new experiments, which have only tended to confirm him in his opinion.

Existence of Two Distinct Forms of Eruptive Fever, usually included under the head of Measles, and the Relation to them of so-called Rubéola or Rötheln.

Dr. W. B. CHADLE, of London, at the London Congress, read a paper with the above title, of which the following is an abstract:—

That one attack of a contagious exanthem confers upon the individual who experiences it immunity from any further attack of the same disease is a rule which has been found to hold good with regard to measles as generally as it does in the case of scarlatina or smallpox.

Yet in two recent epidemics, both of them of severe and pronounced type, which followed one another in the same district within the year, it was found that the individuals who suffered in the first epidemic obtained no immunity from the second; and, further, that no previous attacks whatever of ordinary measles exercised any protective power against the second epidemic. Of thirty cases of this second epidemic, in which absolutely reliable histories could be obtained, twenty-two of the patients had had measles before, and ten of these under the author's personal observation, within the year.

Certain deviations from the common type, such as a shorter period of incubation, severe laryngeal symptoms, and other special features, taken together with the fact that previous attacks of ordinary measles conferred no protection, prove the disease of the second epidemic to be an essentially distinct exanthem. The question then arises whether it was a new and unrecognized form of eruptive fever, or the only other known form of measles, Rötheln. The exceptionally severe and even malignant character of the disease at the onset would seem to negative the idea of Rötheln, which is always described as a disease of an invariably mild type. But after weighing all the facts, the conclusion is arrived at that the disease was Rötheln, which prevails not only in the slight form which is acknowledged, but in a severe and malignant form also, hitherto not recognized as Rötheln, but erroneously described as an exceptionally severe variety of common measles.

Real Position of Rötheln, Rubéola, or "German Measles."

Dr. WILLIAM SQUIRE, in a paper read at the London Congress, gave a short historical survey of the literature of this disease, and showed that it was known before it received a distinctive name.

The disease, in his opinion, has but a superficial resemblance to scarlet fever, but has close relations to measles in several points. But it is self-protective, is as distinct from measles as varicella is from variola, and possesses all the marks of a specific disease. It is contagious; it runs a definite course; it occurs but once in the same person.

Dr. KASSOWITZ stated that, 1. In the epidemics of rötheln which have come under his observation, he has never noticed the affection passing into true measles.

2. The resemblance to measles is, nevertheless, sometimes so marked, both as regards the eruption and the associated phenomena, that in any single case the distinction from the milder form of measles, which runs a rapid course, is rendered extremely difficult, and, in such circumstances, can generally only be made by having regard to other cases in the same house and family.

3. If this affection has any special relationship to any other acute exanthem, it is to measles, not to scarlet fever, that it is allied.