

Plasmodial Anemia.

In spite of the modern theory of the etiology of malaria and malarial affections (mosquito-borne infection) this plasmodial disease continues to be rife in certain sections of the country and bids fair to be, like "the poor," "always with us."

Every physician of experience appreciates the principles which should guide him in the treatment of the various acute manifestations of paludal poisoning, i. e., the destruction of the plasmodial hosts which have invaded the blood and which, if not eliminated, consume and destroy the red cells, the vital element of the circulating fluid.

When this purpose has once been accomplished the patient is but partly cured; the damage done to the red corpuscles must be repaired and the vitality of the blood restored, if re-infection is to be avoided. If there is any one condition in which direct hematonic or blood-building therapy is positively indicated, it is in Post-Malarial Anemia. As soon as the febrile period has passed, iron, in some form, should be given in full dosage. **Pepto-Mangan (Gude)** constitutes the ideal method of administering this essential blood-building agent in this as well as in any anemic condition. Both the iron and manganese in Pepto-Mangan are in organic combination with peptones and are therefore easily and promptly absorbed and assimilated without causing digestive derangement or producing constipation.