swelling to distinct pigmentation. These noxious elements disturb the harmony of their exquisitely balanced functions, interfering with the infinitesimal chemesis so necessary to the

production of rational action and thought.

The indirect action of the infection upon the central nervous system occurs through the disturbance of the organic mechanism engaged in the digestion of food. The effect on the functions of the alimentary tract by the toxic material is to lower the nutritive qualities of the ingesta, and, therefore, the blood plasma, upon which the brain, like other organs, is dependent for the maintenance of its vitality. Also, the infected blood current, circulating through the capillaries of vaso-motor centres, irritates these centres, and disturbs through them the equilibrium of the cerebral circulation, thereby enhancing the intoxication already produced in the centres of thought and reason. Furthermore, if in the infected patient there exists a prior condition of heredity, the effects of the toxemia are intensified. Is it then to be wondered at that such a delicately poised organ as the brain should show the various phases indicative of mental disquietude, ranging from hebetude or delirious muttering to the intenser or graver forms of melancholia and mania?

EFFECTS OF INFECTION LOCALLY.

The effects of infection locally upon the wound or the tissues in its immediate vicinity are governed by the locality of the injury. Superficial wounds of the body, especially of the face and head, are easily amenable to treatment and, as a rule, resolution is rapid. Injuries, however, of the genital tract, from its situation, and especially if located in or around an organic structure, are more difficult of amelioration. Pathological processes in uteri often embrace the whole organ, owing to its extreme vascularity, and by extension or penetration may easily implicate the adnexa or other pelvic contents. Thus, to the burden of infection in puerperal cases, are added inflammatory lesions, which often of themselves wreck the future health of the individual.

THE INSANITIES FOLLOWING INFECTION.

1. Erysipelatous insanities. A study of eight cases of insanity traced to the infection of the streptococcus of Fehleisen shows that the insanity may occur during the attack of erysipelas, or may follow the subsidence of the infection. They were all of the maniacal type, ranging from mild, paroxysmal mania to acute, violent mania, and which, in some cases, merged into a condition of chronic mania. Three, who became insane during the attack, recovered, one mentally improved, one died three