Marked impairment of function, local and constitutional.

Far Advanced.

Localized consolidation intense;

Or disseminated areas of softening;

Or serious complications.

Acute Miliary Tuberculosis.

From the sanatorium point of view incipient cases are essentially of hopeful prognosis. Besides having but little local involvement and very slight constitutional disturbance, the symptoms and signs should point to the absence of a secondary infection. Cases with comparatively few abnormal signs in the lungs, but with severe accompanying constitutional symptoms are often mistakenly recommended as incipient cases because of the comparative lack of pulmonary signs alone, regardless of other more important factors. Frequently they should rather be considered far advanced, and must therefore be rejected, although the duration of disease may have been comparatively short.

The moderately advanced class is a comparatively broad one and contains more cases of doubtful prognosis than either of the others. Secondary infections are frequently present. The disease is more marked, both locally and constitutionally, than in the former class, but a balance must be struck between the local and general condition; if there should be any disproportion on the one side it must be compensated by a relatively less grave condition on the other; i.e., if a considerable amount of local disease is present the constitutional impairment must be relatively slight, and vice versa.

In the far advanced class are placed many cases which may be neither of long duration nor of very extensive local disease. Constitutional symptoms of a severe type might place a case with comparatively little local disease in this class; and conversely, a case of longstanding with widespread fibroid disease and evidence of past excavation would, without very marked constitutional impairment, also be rightly placed here.

It is needless to say that the hospital does not wish to receive cases which should be classed as far advanced or acute miliary.

The National Association at its recent meeting also suggested the use of certain definitions of the extent of disease in the lungs. These definitions, a part of Turban's scheme for a method of comparative statistics for pulmonary tuberculosis, were recommended for adoption at the International Conference on Tuberculosis a year ago. They are as follows: