

were, at one and the same time. Again, it was particularly observed that those close restrictions which many parents put upon their children in separating and confining them from the beginning beyond the boundaries of contact with others, who had either been already infected, or had mingled with the diseased. I say, these restrictions, just and appropriate as they were, proved no guarantee for their preservation and safety. Their constitutions were not proof against the infectious principle which pervaded the atmosphere throughout. To verify this statement, I select the three following cases.

The first was that of a merchant, who lived at one end of the town, and who, from the first, confined his only child at home, and carefully preserved her from any inter-communication with others; yet, strange to say, she was among the first to take the disease in that quarter, and although the fever was mild, she suffered severely from secondary symptoms.

The second was that of a gentleman whose residence was situated on an elevation at some distance from the other extremity of the town, and although he prohibited his children from overstepping the precincts of his private domain, one of them suffered from scarlatina in the form of anginosa, and that, too, in spite of the previous administration of belladonna globules.

The third instance to be mentioned was that of another private gentleman, whose family resided two miles from town, in a fine healthy situation, yet three months' seclusion did not exempt one of his children from the disease. Nay more, this same one suffered from a second and more severe attack about a month subsequent to complete convalescence from the first.

Another feature of this epidemic, worthy of being observed, was the relationship between the evident changes in the atmosphere, and the condition of the disease, not only in respect to the numerical increase or decrease in the scarlatina patients, but also in reference to the different types the disease assumed.

At the commencement of the epidemic, the disease was very frequently of a typhoid nature, demanding the use of powerful stimulants; but as the heat of summer advanced, and the temperature of the atmosphere rose, it assumed a nature more decidedly inflammatory, in conjunction with the rapid increase in the number of persons infected. In July abundance of rain fell for a few days, followed by high winds, which effectually cleared up the atmosphere, and checked, in some measure the progress of the disease, and in no small degree diminished its intensity and virulence.

This mitigation was unfortunately, however, of short duration. At no distant period a fresh impulse was given to the extension of the disease.