

foundation, of more serious and permanent disease of the kidneys. Regarding this point, I cannot do better than quote the observations of Dr. Watson on "Dropsy following Scarlet Fever"—"It is an interesting fact," he remarks, "that the chronic form of renal dropsy manifesting itself at some distance of time, has been distinctly traced back to its source in the acute anasarca immediately consequent upon scarlet fever. The sequence has occurred, in all probability, much *often* than it has been noticed. There is scarcely room for doubting that one form—the granular or inflammatory form—of the organic renal degeneration described by Dr. Bright, does frequently date its origin from an attack of febrile anasarca; and in proportion as facts accurately observed, accumulate on this subject, the chain of connection becomes more clearly visible between acute febrile dropsy, dropsy succeeding scarlet fever and chronic renal dropsy."

Allow me to conclude this but imperfectly written paper, by drawing the attention of your readers to a subject which has only lately been brought before the profession—I mean *Scarlatinal Vaginitis*. The exanthematous inflammation sometimes extends to the mucous membrane of the Vagina, giving rise to an abundant discharge of muco-purulent matter, which in some cases is so acrid as to excoriate the labia, thighs, &c., and prove a source of great suffering and discomfort. Since attention has been directed to the frequent occurrence of Scarlatinal Vaginitis by Dr. Cormack, (*Medical Gazette*, August, 1850,) I have observed four cases in children under 10 years of age affected with *S. Anginos*, where this local affection was characterized by great heat and swelling in the parts, acute pain on micturition, and constant and copious discharge of yellow muco-purulent matter, accompanied by excoriation of thighs, &c. They all recovered under appropriate measures. It is important that the disease be always attended to, as the uneasiness and suffering it occasions are great at the time. In the epidemic of Scarlet Fever in 1848-49, Dr Cormack relates that out of 23 female patients, all of whom were cleanly, well-nursed, and in a respectable social position, 12 of the number had well-marked Vaginitis. All were under 14 years of age, with the exception of two who were respectively 26 and 28 and both married. These two were attacked with acute Vaginitis much more severe than any of the children, and one, who was pregnant, aborted.

Montreal, June 16, 1855.

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