

ment—all conditions, in fact, that tend to the production of nerve debility. On these or even on healthy centres, we have, for example, a deluge of toxins from the gastro-intestinal tract, irritating or paralysing the cells, and all sorts of nerve explosions occur—a vomiting, a polyuria, an urticaria, a migraine or a convulsion. In infancy or early childhood, owing to the late maturity of the inhibitory centres, they are more liable to occur.

The pneumogastric nerve—the afferent nerve, chiefly acceleratory, to the respiratory centre, the afferent inhibitory, to the cardiac centre, the afferent inhibitory to the vaso-motor centre, the sensory and motor nerve of the larynx, the motor nerve of the pharynx, the sensory and motor nerve of the esophagus and stomach and motor nerve to the intestine, forming largely, as it does, the great pulmonary and cardiac plexuses, intimately connected with the great sympathetic system and cerebral centres, both cortical and basic, the vagus becomes the active partner in the neuroses of the respiratory tract.

Most of the lesions are irritative rather than destructive ones, as evidenced by their transitory character.

If the irritation be peripheral, *e.g.* in the digestive tract, the discharge may be manifested there, perhaps as a colic or a diarrhea, but not necessarily so: Should the vaso-motor centre be irritated, peripherally or centrally, the discharge may take place through any or many of its efferent branches, following the lines of least resistance.

Again, the location of the lesion may be determined by some local irritation (Osler). For example, in the eczemas of infancy, during the dentition, when gastro-intestinal disturbances are common, the location of the manifestation is determined by the local cutaneous irritation, but if the local irritation be laryngeal or bronchial, then the manifestation of the neurotic disturbance will be a laryngeal edema, a laryngeal spasm, a turgescence of the bronchial mucosa or a spasm of the bronchial muscles, to which may be added an infection instituting an active inflammation.

It is a matter of common observation, that infants during the period of dentition are subject to alternating attacks of eczema and bronchitis, or eczema and diarrhea, and with the laity eczema is looked upon as a safety valve, during this critical period of child life.

There is more than a grain of truth in the proverb, and probably these are vaso-motor disturbances and their location determined by some coincident irritation.

This is illustrated very clearly in a paper on "The Visceral Manifestations of the Erythema Group of Skin Diseases," by