eruption is not infrequently diagnosed as measles, and vice versa. The observer is usually misled by the appearance of the eruption on the face, the arms, and the neck. In confluent smallpox the skin in these situations is often intensely hyperemic, swollen, and studded with raised pink or purple papules, accompanied in many cases by conjunctival suffusion. The patient's aspect and the appearance of the eruption are very like those of measles, but close observation will show that the papules are more raised than are the papules of measles, and by drawing the finger firmly across the forehead, the eruption will be felt to be hard and shotty, while in measles, though slightly resistant, it is soft and That is the diagnostic point. Probably also in smallpox some of the papules will show commencing vesiculation.

Syphilitic eruptions.—Usually the scaling and pustular eruptions are mistaken for smallpox. The coexistence of a papular, scaling, and pustular eruption, its symmetrical appearance, and the history of the case should negative smallpox. If the specific eruption be ushered in by very high fever it is to be noted that the papules are not shotty but flat, and careful inquiry and inspection will in most cases resolve the doubt. Here most errors in diagnosis are due to the observer omitting to examine the whole of the eruption, and to insufficient inquiry as to the history of

the case.

Herpes.—Small clusters of herpes, wherever situated, may simulate vesicles of smallpox, but the absence of initial symptoms and full development of vesicles on the first day should obviate any mistake.

Eczema and impetigo.—In these conditions, also, smallpox is negatived by the absence of initial symptoms, nor do the vesicles or pustules bear much resemblance to those of smallpox. Yet a considerable number of cases of impetiginous eruptions are diagnosed as smallpox, even in the out-patients' departments of the general hospitals.

Pemphigus.—In pemphigus, the initial symptoms are absent, and the bullæ are larger than smallpox vesicles and are filled with

a clear fluid; they collapse on being pricked.

Urticaria papulosa.—In this disease the wheals are small, of about the size of a split pea, somewhat hard to touch, and of a duil white color, and those on the extremities are sometimes not unlike smallpox vesicles. They attain their full size almost at the moment of their appearance, and either have no redness at the base or the usual erythema is present. The initial symptoms of smallpox are absent.

Acne.—The initial symptoms of smallpox are absent in acne, and the eruption affects the face, the shoulders and the back for