

the stages of hepatization can be examined and the affected area accurately defined. Nor does the difficulty materially increase with the diminution of the area of the hepatization. Lobar and lobular alike are easily diagnosed.

This being the case it requires no stretch of imagination to understand the applicability of this method to the diagnosis of tubercular lesions even in their incipency.

No attempt will be made in this brief paper to point out the appearance of the tubercular lesions of the lung as viewed on the fluorescent screen. A knowledge of the relation of the transmissibility of the ray to different densities can only be acquired by actual experience.

To those unacquainted with Roentgen ray work the foregoing will serve to indicate the lines on which differentiation of the physiological from pathological is based, while to those already familiar with it such a dissertation would be superfluous.

We append an analysis of a few cases recently under observation. Of fifty-two suspected cases of pulmonary disease examined during the past three months, largely at the out door-department of the Hospital, thirteen were diagnosed tuberculosis—seven in the incipient and six in the advanced stage. Of the seven in the early stage the diagnosis was confirmed by bacteriological examination in all but one. The sputum of the seventh up to the present contains no tubercle bacilli. It may be that this is a "cured," case that the cloudy areas in the lung are the result of cicatrization and possibly of calcification. Against this, however, is the fact that the patient's temperature is never quite normal, although it rarely exceeds 100 F. It is significant to note in this connection that in at least two of these cases bacilli were only detected after several careful examinations. Of the advanced cases bacilli and pyogenic organisms were found in all.

Of the remaining thirty-nine there were found four only whose appearance suggested tuberculosis. The sputa of these were examined with negative results.

On more than one occasion during the past forty-three months has an X ray examination of the chest sounded the warning note when auscultation and percussion have indicated no departure from the normal. The progress, great as it is, must only be considered a reconnaissance.