

of cases; of the erratic nature of the disease; of the usual complications, and of the conditions under which Rheumatic Fever occurs, are sufficient for its elimination; while the presence of the characteristic symptoms of Trichiniasis before detailed, the Typhoid character of the fever, the absence of affections of the joints, the possibility of finding Trichinae in the muscular tissue of the subject, and the conditions under which Trichiniasis occurs, establish its presence. An ante-mortem diagnosis of the disease, was first made in the year 1862, by Friedrichs, by the removal of a portion of muscular tissue, which is by far the most certain means of ascertaining the presence of the disease; but without resorting to this process the disease is quite as easily distinguished as most others in the nosology.

Typhoid Fever can usually be excluded by the absence of the following:—Its gradual and insidious manner of developement; the congested state of the skin; the dilated pupils, the dull state of the intellect; the delirium *during the second septenary* period; the character of the stools (ochre colored and contain uncoagulated blood and sloughs of the Peyerian and solitary glands); the early appearance of meteorism, iliac tenderness and gurgling; the tendency to hemorrhages from mucous surfaces, of Epistaxis and blood in the stools before stated; the appearance of successive crops of lenticular rose colored papulae on the abdomen, from the end of the first week to the fourth; its endemic appearance, its tendency to attack those from 16 to 35 years of age and the liability to relapses.

*Mode of Examination of the feces.*—Water should be added until they are rendered fluid, if they be not already sufficiently diluted; the suspected matter is then to be placed on the object glass drop by drop, when with a magnifying power of 20m. it is possible to find the worms.

*Mode of Examination of Muscular Tissue.*—Remove a small portion of muscular tissue by the process of harpooning, or with the knife from any convenient place of the deltoid, (it is advisable to take flesh from the acclimitous parts, and those are generally near the insertions or tendons of the muscles, for in such places the worms meeting with an obstruction are found in maximum numbers) and subject the portion thus removed to microscopical examination. If the cysts have undergone calcareous degeneration, they can be distinguished without any difficulty. It may be remarked that an examination after the worms become encysted, is seldom required, for when this process has taken place recovery is the result. If encapsulation has taken place, but the cysts have not become calcified, the capsule can be seen inclosing the worm; a little dilute acetic or hydrochloric acid to which a small quantity of