arterial tension, the natural equilibrium between the internal and external pressure is disturbed, capillary stases and exudation take place most frequently in the line of the least resistance, that is, where the smallest amount of external pressure is exerted upon the capillary system: viz., the lungs, serous and mucous membranes.

The peculiar arrangement of the circulation in the lungs is probably one of the chief reasons, next to their glandular structure, why these organs are more frequently the seat of tubercular disease. Their nutrient arteries have no veins. Their blood is re-aëated where they do their work, and finds its way into the veinous radicles of the pulmonary vein as arterial blood. (7). Stasis in the pulmonary capillaries reacts upon the mucous membrane of the true respiratory system, inducing hyperæmie, desquamation of epithelium, and exudation.

Now, as to the question, why do we have from the same cause, viz., high arterial tension and pulmonary stasis, an exudation, which in the one case results in a chronic fibroid, and in the other an acute tubercular consumption, two diseases differing in their course, symptoms, physical signs and termination, having nothing in common beyond the fact that both are wasting diseases and both affect the same organs,—the lungs.

Our present knowledge upon this subject may be summed up in the one word, *temperament.* Divide the human family into two classes. In one class, place all those having an excess of carbon in the composition of their tissues, and characterized physically by dark hair, dark skin, angularity of figure, languid circulation,—call these, in lieu of a better name, the lymphatic temperament. The exudation in individuals of this temperament will, irrespective of treatment, have a strong tendency to take on a fibroid character.

In the second class, place all those characterized by light or brown hair, florid complexion, rotundity of figure, active circulation, having an excess of oxgyen in the composition of their tissues, call these the sanguine temperament. The exudation will, in individuals of this temperament, often regardless of all known therapeutic measures, early become tubercular, run a rapid course terminating fatally —acute tubercular phthisis. These are the extremes, combinations exist, as the lymphatico-sanguine and the sanguino-lymphatic in which the exudation will be modified accordingly.

II. *Symptoms.*—The cells composing the higher organism when deprived of oxygen do not all die at the same time; some are able to live longer without fresh supplies of oxygen than others. (8)

As in the death of the cells, so in the disturbance of their function from impaired nutrition, they are not all equally affected. The higher nerve centres are the first to suffer usually in the following order:—

Intellection.—There is disinclination and incapacity for continued mental effort, the mind is easily confused, forgetfulness, despondency, and annoyance at little things are common. Sleep is disturbed; in the early stages a desire and ability to sleep at all hours, and especially after meals, later insomnia is a marked and almost constant feature.

Special Senses.—The eyes are early affected, they are weak, becoming painful and injected on using them but for a short time. Partial deafness and tinnitis aurium are frequent, more so in the lymphatic, while the eye affections are more common in the sanguine temperament.

Vaso motors.—Through their irregular action, morbid flushings are common, these do not, as a rule, appear at the time of effort or emotion,—pallor is more common then, but they follow after, when the ten-