

fossæ. The cervical glands soon become involved as the lymphatics from the nose empty into them, there is an increase in the secretion from the nostrils, the patient blows his nose frequently, the mucus secreted is mixed with minute quantities of blood, and there are generally attacks of epistaxis ; within 24 or 48 hours there will be a profuse flow of sanious ichor and the lining of the nostrils is covered with false membrane ; there is also present lachrymation, an almost never-failing symptom ; it is caused by obstruction of the lachrymal passages from tumefaction of their mucous lining. Sometimes the false membrane reaches the eye from the nose. Notwithstanding, with the mildness of the general symptoms life is always in serious jeopardy when there is much glandular engorgement. This glandular turgidity, says Trousseau, is a symptom redolent of malignity, and he says there is no occurrence so alarming as the extension of the disease to the olfactory mucous membrane. Of 20 persons attacked with nasal diphtheria 19 die. Bleeding from the nose often precedes the formation of false membrane, and these bleedings constitute an important warning of the coming of plastic exudation. Epistaxis must always be regarded as a most serious symptom. Great blanching of the skin is a constant accompaniment of this form of diphtheria ; it is a sign of the cachectic state into which the patient has fallen. There is a dislike for food both in children and adults. The gallop heart rhythm, indicating severe heart failure, is frequently present even before the pulse becomes markedly quickened ; it is supposed to be caused by the ventricles not contracting at the same time.

As the case goes on, the surface becomes cold, there is either extreme restlessness or an ominous stillness supervenes and, as I have seen upon at least three occasions, syncope may occur ; once in a boy twelve years old wishing to empty his bladder, while in the act fell forward against the bed a corpse, and two younger patients die under similar circumstances.

Laryngeal diphtheria may be either primary or secondary ; the latter is the commonest form. It is then an extension downwards from the nose or pharynx ; its propagation to the