depending upon the resistance of the individual and its relation to the degree of infection. Where there is a severe infection with little resistance there is no leucocytosis and vice versa. Then, too, more or less marked leucocytoses are present in uric acid diathesis, in chronic nephritis, (which is present in most elderly overworked people), after the use of phenacetin, after excitement or exercise or massage, or cold baths and after food ; this so-called digestive leucocytosis is not, however, always present, for what reason it is unknown. In face then of such a list it may well be asked what significance is to be placed on a moderate leucocytosis. It is true that by its means we are aided in distinguishing between abdominal inflammation and hysteria or between appendicitis and neuroses, but where a leucocytosis can occur so easily we must exclude all the many extra causes—a task not always easy. At all events we know in this connection that for reason of this variation we cannot employ the absence of a digestive leucocytosis to confirm a diagnosis of gastric cancer, as some have considered possible.

Again in one case of nephritis in which the autopsy confirmed the diagnosis to the exclusion of any other disease, there was a leucocytosis of 30,000, of which the main increase was in the small and large lymphocytes, in repeated examinations. In another patient with general debility there was a leucocytosis of 20,000, which at the end of a fortnight disappeared as the patient regained his health and strength. In this case the leucocytosis was of the ordinary variety (polynuclear increase).

Considering then under what great variety of circumstances one may get a leucocytosis and considering too the many latent conditions which would have to be excluded before we attach any diagnostic importance to the presence of some increased leucocytes in the blood, we are bound to acknowledge that the diagnostic value of this condition suffers in consequence. That lymphocytosis, too, is of some value in the diagnosis of pertussis may be true, to most practitioners the satisfaction would be greater were it possible to tell thereby when the disease had come to an end !

In attempting to form a rational conclusion as to the significance of slight leucocytosis we must be prepared to exclude many simple conditions, and we must be aware that no latent condition giving rise to leucocytosis is present. Thus our use of this means of diagnosis is limited, inasmuch as in those cases where it might be expected to signify some pathological condition, the increased cells may be due to something else.

It is just with reference, too, to this point that *surgery* loses so much the expected aid from blood examinations, and it is not to be wondered