All these factors, however, cannot be appreciated in every instance, though usually sufficient will be present to give an indication of the condition causing the disturbance. The fact of such pain being increased on pressure is taken advantage of in differentiating spasmodic from inflammatory affection of the bowels. That the pain in inflammation is always maximum at the seat of the disease may be restricted with the proviso, when pressure is applied. Appendicitis, in which pain is a very prominent symptom, is by no means definitely localized at first, though subsequently it is felt in the region where the morbid process is taking place; and anyone who has suffered from a severe toothache, the result of an ulceration or abscess, is well aware that the severest distress may be experienced in parts quite remote from the original disturbance. Tenderness on pressure is also not diagnostic of inflammation, as Hilton shows in differentiating an inflamed from an irritable ulcer, and he adduces an increase of heat in the part as the pathognomonic symptom.

The next variety of pain in this classification is that produced by pressure, and the continuous character and wide radiations are the chief distinguishing features of such a derangement. One would naturally expect in the subjection of any nerve trunk to direct pressure to have some manifestation of the disturbance in the peripheral distribution of the filaments but any pathological process in sensory nerves devoted to painful sensations in their continuity, might also show the pain in regions from which they normally convey stimuli.

Derangement of function, which is regarded as one of the chief diagnostic points in inflammatory pain, may occur in certan regions of the body and notably the brain, when subjected to pressure, and quite easily may be confused with an inflammatory process; and when both obtain at the same time, the possibility of ascertaining the cause definitely, other things being equal, is problematical.

Stretching pains, illustrated by colic and sprains, form the third division. The special characteristic is the suddenness with which such are ushered in; and another quality of this class is the associated superficial tenderness, which is especially marked in the case of sprains.

Other affections with a totally different causation may set in with very sudden pain, and biliary and nephritic colic have often been mistaken for appendicitis or *vice versa*; but in the absence of other definite symptoms, an appreciation of the spasmodic character of the pain may be of distinct value in classifying the ailment.

Neuralgic pain forms the fourth division of the subject, and although varying very much in its manifestation and intensity, it is characterized throughout by its intermittency. By the term neuralgia we usually understand a painful affection of the nerves associated with tender points