

came in for treatment as a complication, but it had been well described abroad, and especially by French writers. In 1885, Freund gave an account of the literature of the subject, and reported five cases of his own. In the preceding year seventeen cases observed by other authors followed, among which were eight by Ebermaier, who was the first to furnish proof that the affection owed its origin to the typhoid bacillus. The disease consisted in longer or shorter, slighter or heavier, attacks of periostitis and osteomyelitis of a suppurative or non-suppurative form. The attacks befall the most varied parts of the bony structure. A careful examination of the recorded cases show that a large number of the cases described must be excluded from the category of typhoid osteitis. The author had only observed the disease five times in sixteen hundred cases of typhoid fever. The most remarkable case was that of a boy of $7\frac{1}{2}$, in whom, in the course of four months, seven outbreaks of the disease attacked ten different parts of the bony system. The boy recovered, and indeed began to mend from the day on which the crisis of an attack of influenza occurred, the only good deed, the author remarks, he had ever witnessed from the miserable *grippe*. The other four cases were observed in the hospital Friedrichshain—two boys aged 12, a man aged 21, and a woman aged 25. The last patient showed a pyæmic temperature curve, with rigors, although suppuration never took place. Disease of the ribs awakened suspicion of a hepatic abscess. Recovery took place in this case also, although the patient was at one time as good as given up. In the third case the trochanter and ischium were chiefly affected, the diagnosis as marked on the note of admission being coxitis. In the fourth case the skull was the part affected, in a rather severe but evanescent manner. The fifth patient died after cessation of the osteomyelitis from hæmatopyopneumothorax, in consequence of bursting of a necrotic collection in the lungs. The author preferred the term osteoperiostitis, as a separation of the osteitis from the periostitis was not possible. His cases confirmed the view of Ebermaier that the typhoid bacilli wandered from the medulla of bones to the periosteum. As regards symptomatology, he remarked quite striking exacerbations of pain, and the frequency of the occurrence of the