

after all symptoms have abated, and would forbid return to school while any redness of the fauces or any coryza lingers. The discrepancy of opinion in this respect among the leaders of professional thought suffices to show the need of more definite data to guide our deliberations.

*Whooping-Cough.*—In pertussis, all opinions agree, save one, that contagiousness ends when the cough loses its spasmodic character, the single doubtful view being that, as the danger is wholly from the breath of the patient, it can not be determined how long the cough may convey infection. It should be remembered, however, that a few writers have expressed doubts of the contagiousness of pertussis in any stage.

*Measles.*—With regard to measles I find equal diversity of views. One regards its contagium as very volatile, not long adhering to person or clothing, and permits the return of the patient to school two weeks after convalescence; a second would defer liberation from quarantine until a week, at least, after desquamation; a third releases the patient when desquamation has ceased, or, in cases where no desquamation occurs, after twenty-one days; a fourth fixes eighteen days; a fifth believes the danger past when the febrile stage and eruption are gone. The majority measure the time of isolation by the process of epidermal exfoliation.

*Scarlatina.*—In scarlatina, also, we have opposing opinions, ranging from that which considers it as a pythogenic disease, slightly, if at all, contagious from the person, to that which holds the infection to be communicable by the pulmonary exhalations, the blood, the naso-pharyngeal secretions, even the urine, as well as by the epithelial scales. One of my correspondents thinks the infection remains so long attached to the person that quarantine should endure for eight weeks; another cites an example of transmission after six weeks of isolation followed by a change of clothing; the rest concur in releasing the patient after desquamation has ceased and the surface been thoroughly cleansed. Most of us, I dare say, have adopted this "rule of thumb."—*N.Y. Med. Jour.*