

ence in smallpox. In a very few cases, however, especially in adults, there may be initial symptoms of backache, malaise, and some pyrexia, lasting from 12 to 48 hours, and followed by eruption. These are most exceptional, and usually the first thing noted is the eruption of vesicles on the trunk, the limbs, or the face. If observed from the very commencement these are at first macules, which in an hour or so become papules, and in a few hours vesicles. Some of the vesicles attain their full size within 8, 12, or at most 24 hours. The vesicles are then usually glistening, hemispherical, or dome-shaped or transparent. On transfixing with a needle the contents escape and the vesicles collapse. The shape of the vesicles is elongated, elliptical, or circular on the trunk and extremities, and irregularly round on the face and the scalp. On the forearms, the hands, the legs, and the feet they are often circular, and smaller than those on the trunk. In these latter positions the vesicles, being small, look not unlike the vesicles of modified smallpox, and in addition they have often a more or less shotty feeling. In a large number of cases typical chickenpox vesicles will be found only on the trunk, not on the face or extremities; as a matter of fact, the distinctive shape and appearance of the vesicles of chickenpox become less and less characteristic towards the distal ends of the extremities. Often within eight or thirteen hours, always within 24 hours, of the appearance of the eruption, some of the chickenpox vesicles have reached their full growth, and are then as large as the vesicles of smallpox in unvaccinated subjects at the fourth or fifth day of the eruption, and as large as, or larger than, the vesicles of smallpox in vaccinated subjects at the end of the third day of the eruption. If the eruption be copious, many of the chickenpox papules abort, many of the vesicles do not attain their full growth, never becoming larger than a small pin's head. In some few cases the vesicles fill only partially with fluid, are flattened, and are of a dull white or tallowy color; but in these the distribution of the eruption is markedly that of chickenpox, and the elongated or elliptical shape of many of the vesicles is pronounced. In point of distribution the eruption of chickenpox is, as a rule, most abundant on the trunk, less so on the face, the scalp, the thighs, and the arms, and still less so on the forearms, the hands, the legs, and the feet. On the palate and the fauces the eruption is present in many cases, but usually it is sparse. Pyrexia in chickenpox is usually synchronous with the appearance of the eruption, and the temperature may or may not fall when the eruption is fully out. In cases where the eruption appears in successive crops there is usually a distinct rise in temperature with each crop.

What, then, are the diagnostic points between chickenpox and