from the original disease. The secondary poison may be transmitted from the father to the mother. The inherited taint protects. The disease does not appear in a second generation.

Rheumatism, heart trouble, asthma, hay fever, and diabetes, present a group which by the insurance examiner must always be considered as having a direct hereditary influence on the character of a risk.

The peculiar nervous phenomena working through and intimately connecting these diseases have not yet been made clear by pathologists; but to realize the existence of such a connection we have only for a moment to consider the figures presented by Goodheart, backed by the even larger finding of Salter, *e.g.*, of 123 cases of asthma observed by the former, 50 showed a well-marked neurotic inheritance; in 25 it was apparently the direct transmission of asthma or hay fever; in 8 more, one or other of the parents had had rheumatic fever; in other families there is a history of megrim; in others, somnambulism and diabetes existed.

In dealing with these diseases separately, I must again emphasize the point of their marked connection—for while the examiner is in hot hunt for heart trouble where rheumatism is in evidence, in the history he is very prone to overlook where the grandfather suffered from rheumatism or gout—the probable predisposition to asthma, diabetes and nervous troubles in the offspring.

A rheumatic tendency is, no doubt, frequently inherited; the disease has occurred in the newly born, and the children of rheumatic progenitors are more prone to this trouble than are others, in the proportion of five to one.

The disease may be either directly transmitted, or more often a constitutional predisposition to its development seems to be inherited.—*Cheadle.*

Statistics show that in 30 to 40 per cent. inheritance is a factor in rheumatism. Of course, were we to consider only those cases where there is a double inheritance we would find these figures largely increased, and where the progenitors, through successive generations had been afflicted we would find them not only increased, but the type much more severe and persistent.

Acute attacks are seldom seen after fifty, and in early life, especially about puberty, females are more prone to the disease than males; after that the natural exposure the male is subjected to makes him the most susceptible.

Again, in this disease we see the great influence, environ-