

physical signs justifying the antemortem diagnosis of bronchopneumonia; (2) that in 23 consecutive necropsies, not one failed to show corresponding pathologic changes in the lungs; (3) in patients coming to necropsy the pulmonary changes are more extensive than were indicated by physical signs during life, and (4) clinical studies of non-fatal cases justify the belief that, with very few exceptions, all severe cases have bronchopneumonia. He does not absolutely deny that the influenza patient may succumb to an overwhelming toxemia from meningitis or encephalitis without pulmonary involvement, but none such occurred in the hospital under his observation. The physical signs on which is based the diagnosis of the pneumonia were areas of bronchial breathing or consonating râles, usually both, frequently bronchophony, and often dulness on percussion. The early foci of consolidation were found almost invariably in the region of the angle of the scapula and the intrascapular regions, as shown by the roentgen ray. From all the facts that Christian has observed, he considers that it is incorrect to attribute the fatalities in this epidemic as due to uncomplicated influenza.

INFLUENZA.

The epidemic of influenza at Camp Sherman is described by Alfred Friedlander (Cincinnati), C. P. McCord and F. J. Sladen (Detroit), and G. W. Wheeler (New York), Medical Officers at Camp Sherman, Chillicothe, Ohio (*Journal A. M. A.*, Nov. 16, 1918). At the beginning the syndrome was not characteristic, but the uncertainty as to the diagnosis was abruptly ended by the appearance of the characteristic symptoms later, in a large number of cases. At that time the population of the camp was 33,044, the majority were white, but 8,531 were colored. Of this total 46.8 per cent. had been in service one month or less, and these furnished 69 per cent. of the influenza cases. The analysis shows that the incidence of the disease decreased with the length of residence. The total number of individuals affected was 10,979. During all stages of the epidemic, the casual organism was sought bacteriologically in the sputum, throat and blood cultures from patients, and also in postmortem cultures from heart and lung. The predominating organism was the pneumococcus, the different types in the following percentages: Type IV, 80 per cent.; Type III, 18 per cent.; Type II A, 2 per cent. Certain immediate contacts with influenza patients without showing symptoms of the disease were also examined bacteriologically, and the pneumococcus was found in 76 per cent., and when typed were invariably Type IV. One culture with pneumococcus predominating gave two colonies of Pfeiffer's bacillus. The cultural conditions for this organism were suitable, but in no other cases does it seem to have been detected. In 46.7 per cent. of the necropsy