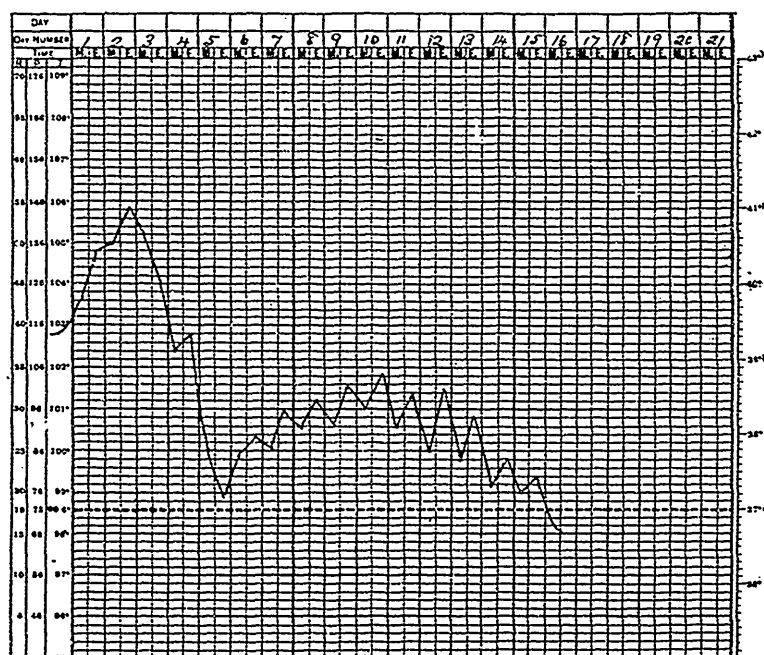


There appears to be a relative immunity ranging from zero where no protective influence exists to that of complete, where patient will not develop the disease. This latter may be natural, as is recorded by some writers who have observed this to obtain. Usually, however, it is secured artificially, either by vaccination or inoculation, or naturally by a previous attack of the disease. None of these are absolute, however; in fact, attacks of small-pox quite often follow varioloid, even within two months, if the patient is re-exposed.

To illustrate the facts above cited regarding variola vera, both discrete and confluent, the following cases will be outlined,



four in adults, two discrete and two confluent, and two in children, discrete :

CASE I.—Variola vera, discrete form, is interesting, showing, as it does, the very high initial rise in temperature, rapid fall, and immediate commencement of the suppurative fever. The extent and severity of the delirium is unusual.

Patient, female; aged 16; unvaccinated. Twelve days after exposure patient fell ill with headache, backache, shooting pains in limbs and nausea. No prodromes.