

During this stage the pulse is soft and compressible and the heart beats weak.

When reaction sets in, we have two classes of symptoms. (1) Those arising from the peritubercular congestion in the lungs. (2) Those arising from the general disturbance.

The former or local reaction is characterized by a dyspnoea more or less pronounced, due to the congestion; on auscultation fine râles are heard. Several cases have now been recorded where, in addition to the local congestion, there has been evidence of quiescent tubercular infiltrations undergoing rapid destructive changes. One case is reported of a tuberculous infiltration of the right apex, where, after the fourth injection, unmistakable signs of acute miliary tuberculosis were seen. M. Cuffer concludes that there are two forms of local reactions, one characterized by simple congestion, and another resulting in intensification of the tubercular process.

It is doubtful whether the alleged diagnostic value of Koch's lymph will come up to early expectations, a number of cases having been reported of tuberculosis where neither a local or general reaction has followed repeated doses. It is maintained by some that reactions have followed the use of minimum doses in other diseases. A little more experience will clear up this point. As to the time of the reaction setting in, cases vary generally. It has been noticed as early as three hours, and in a few cases as late as fifteen hours.

URATOSIS.

The term *Uratosis* has been suggested by Sir Wm. Roberts to designate that disordered state of nutrition characterized by the deposition of the crystalline urates in the tissues or fluids of the body. By adopting this nomenclature, several advantages, it is claimed, would follow. First, a distinction would be clearly drawn between the effects of an excess of uric acid in the blood and uric acid precipitated as crystalline urate. What, if any, pathological significance the former condition has was at present unknown. The serious consequences following the latter state were well recognized. Excess of uric acid in the blood was only an exaggeration of a normal state, while deposition of crystalline urates was, in any quan-