and the early period at which they occur. This last point is worthy of special notice. Gregory, averaging from a very large experience, found the eighth or ninth day after the eruption, i.e., the eleventh or twelfth day of the disease, to be the most fatal, and Wood says that most deaths occur between the twelfth and eighteenth days, or, roughly speaking, within the third week of the disease. By the accompanying table of the duration of the fatal cases that occurred here last year you will see that twenty-six, or more than a third, died before the fifth day, only seventeen survived the tenth, only one lived beyond the nineteenth, and that the average duration of the whole seventy-one cases was but seven days and a fraction.

The same virulence has characterized the disease in other places. Last year, in England, where they have a Vaccination Act which, however imperfect, protects thousands of the population, small-pox destroyed, in seventeen large towns, 13,174 people, including 7,876 in London alone; while the average mortality among the unprotected has varied from about 40 per cent. to more than two-thirds. It has sometimes been observed that the virulence of small-pox epidemics abates after the first month or two. In our half year there was no such abatement, the virulence remained unaltered to the last. The last who were attacked suffered as severely as the first, and of the last six deaths recorded, one died on the second, another on the third and two on the fifth days.

I have to add a few remarks upon the different forms of small-pox that were observed, and their treatment.

HÆMORRHAGIC SMALL-POX.

I have failed to find an exact description of this form of the disease in any of our standard authorities. Aithen says nothing of it. Trousseau speaks of two patients "whose bodies looked as "though they had been rubbed over with the juice of mulberries "or the dregs of port wine." Sydenham, whose opportunities for observation of the malignant varieties of small-pox were ample and well used, gives a very good description of the petechial form, noticing its frequent association with the symptoms of bloody urine, but is not explicit as to true hæmorrhagic small-pox. The only good accounts of the latter that I have found are those of Gregory and Marson, who describe the mucous hæmorrhages and vibices, and mention the fact, the importance of which we have already seen illustrated, that even in the adult this form may give rise to uncertainty in the diagnosis by proving fatal before the eruption has had time to appear. But they agree in stating that it generally proves fatal upon the fifth day of the eruption-