

related, has forcibly reminded me of the similar one of *abdominal* aneurism lately reported to this society by Dr. Colin Sewell, especially as there are these strong points of resemblance between the two. Both suffered from severe neuralgia, and both enjoyed perfectly (so to speak) *lucid* intervals. In both the apparent improvement was (incorrectly) attributed, in a great measure, to the treatment followed. In neither was aneurism positively diagnostic until after sudden death, although in Dr. Sewell's patient (who had been seen in consultation by Dr. Campbell and Dr. Howard) it had been suspected but could not be discovered.

The author already quoted from states that "Intercostal Neuralgia is among the most frequent forms of neuralgia," and Aitken ranks this form as next in frequency to neuralgia of the trifacial, the commonest of all; and as its connection with aneurism renders its frequency and severity a matter of great interest, I should like to ask the older members of the society what their experience has been on these points; and further, whether there are any known clinical facts which will enable us, with any degree of certainty, to diagnose the pain of aneurism of the aorta from simple intercostal neuralgia, in such cases as the one I have described.

*Observations on Dr. Pratt's Essay on the Origin of Fever, read before the Surgical Society of Ireland—Typhoid Fever as Observed in West Rutland, Vt., in 1870.* By OCTAVIUS H. E. CLARKE, M.D., C.M., Cohoes, N. Y.

Most of your readers have, no doubt, seen, in "Brathwaite's Retrospect" or elsewhere, Dr. Pratt's paper on the "Origin of Fever," read before the Surgical Society of Ireland, and the comments thereon by Dr. Edmund P. Sharkey.

The point at issue, whether typhoid or any other fever is caused, or materially fostered by filthy habits, is one of the utmost importance, as the negation of this fact—if fact it be—by the profession would lead to incalculable mischief, by withdrawing the greatest incentive to sanitary reform.

In the autumn of 1870 I attended in West Rutland, Vt., and its vicinity, sixty-one cases of fever I would pronounce, undoubtedly, "typhoid" or "enteric," and thirty-seven cases which were uncertain in diagnosis. The other physicians in the place had, likewise, their hands full. The circumstances under which the disease occurred may be of some interest in connection with the question under consideration.