T.B. ♀ Vagina - diagnosis from Granular Vaginitis.

most frequent is that of the greatest sexual activity. The early symptoms are often not very clear, or so masked by those of the primary affection that the involvement of the genitals is not suspected. When it occurs in the vulva and vagina, it gives rise to symptoms common to all ulcerative processes, and in these instances simple inspection is frequently all that will be required, but a positive diagnosis can be made only by the microscope.

Tuberculous ulceration of the cervix may show itself by profuse hemorrhage, and in that way may be mistaken for carcinoma. In cases in which the uterus is affected there is usually a very profuse leucorrhœa, which in some instances consists of a mixture of the caseous material and the ordinary secretions. The uterus will be found enlarged, and there will be associated with it menstrual disturbances.

The symptoms produced in tuberculous disease of the ovaries and tubes are in most instances overlooked in the general condition, and even no symptoms at all may be present. When the process is limited to the tubes and ovaries, the symptoms will vary from those of a simple salpingitis to those of the most severe form of pelvic abscess, and in spite of careful examination nothing will be found to indicate the tuberculous nature of the affection. Amenorrhœa is not necessarily an accompaniment, but if it occurs it is usually due to the coexisting phthisis.

Diagnosis. From the clinical history afforded, it becomes evident that prior to the discovery of the tubercle bacillus a positive diagnosis of genital tuberculosis could not be made.

Tuberculosis of the vulva and vagina may be confounded with *granular vaginitis*. When the frequency of the latter is compared with the rarity of the former, it is in itself almost sufficient for a diagnosis; but when one considers that when tuberculosis of the vagina occurs it is in phthisical women, and that granular vaginitis is