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tent character, its period of attack depending on the early or late appearance of local inflammation. In a few instances, the remissions of the fever could be traced; but, for the most part, they could not be distinguished. Exacerbations often came on without any previous abatement of fever. Such, indeed, constituted the highest grade of the symptomatic fever. Sometimes the exacerbations were evidently connected with an irritable state of the constitution. At other times they seemed referable to the extent and violence of the inflammation, occupying the peculiar structure of that part which had undergone the solution of its continuity. A high state of constitutional fever, deriving its existence from the presence of inflammation, is not to be regarded in a secondary point of view. It is universally allowed to have much influence on the pain, heat, and swelling of an injured part. To lessen the violence of its symptoms by a general antiphlogistic treatment ought, therefore, to be one of the principal objects of the surgeon.