

on the second day; became rapid, weak, and intermittent on the third day. After use of hot packs and free purgation it improved in quality. Again after hemorrhages recommenced it was of a wretchedly bad quality. Hemic murmurs in the cardiac area were very pronounced in the second and third weeks.

Hematuria, hematemesis, with bleeding from the gums, were present on the first and second days and reappeared in the eighth day, and for a week the patient bled constantly from the nostrils, gums, vagina, and urinary passages. No subcutaneous hemorrhages were observed.

On the day of attack she thinks she passed about the usual quantity of urine. On the day following a smaller quantity of smoky urine. Then for 14 or 15 hours no urine was passed and none could be obtained by catheter. When the kidneys began to secrete again the urine was loaded with blood. This disappeared in a few days, but reappeared in the second week, when considerable blood was lost per urethra. No casts were found after the first few days of illness, and the albumin was never abundant. The quantity of urine soon reached normal.

About the twelfth day the patient began to complain of pain on micturition. This developed into a well-marked attack of cystitis, with an abundance of pus. This slowly subsided and the pus gradually lessened and disappeared.

*Digestive System*—Nausea and vomiting frequent early in the illness, and occasional throughout; the digestive powers being very easily exceeded. During the first few days of illness the patient had a most inordinate craving for food. On the third day the abdominal distension began. This soon reached an extreme degree, displacing the liver and heart upwards, the apex beat being well above the nipple. This gas was chiefly in the small bowel, and it persisted in spite of free purgation and other treatment for about ten days and then gradually subsided.

The liver, which was displaced upwards by the gas, gave a slightly enlarged area of superficial dullness, and the tenderness anteriorly over the stomach and liver was present from the first, and persisted all through the illness. The pain was aggravated by any change from the dorsal position. Strapping the side gave a little relief. About the ninth day, on auscultation below the right nipple, friction sounds were heard. These I believed to be diaphragmatic in origin. At this time also the patient would cry out with pain immediately after swallowing, apparently as the fluid was passing the diaphragm. The erupting of gas was equally painful, the passage of the bolus,