

very vague. Second, the boy in Grand Forks who died of smallpox gave a history of possible exposure to poisons that might have caused an eruption quite similar to that shown at the time of our visit. After careful study of all these cases there was, however, but one conclusion that could be accepted, viz., that all had one and the same disease, smallpox, varying greatly in type and severity.

On August 31st, 1899, a health officer in Southern Minnesota wrote me that two young men, proprietors of a grocery store, had an eruptive disease which he diagnosed as chicken-pox. I replied at once, drawing his attention to the rarity of chicken-pox in adults, and advising him to quarantine the cases. My advice was not heeded. September 21th, I was called by a physician to this same place to see a suspicious case. A boy had consulted him with an ulcerated cornea. The physician noticed some bluish marks upon the face of this patient. Further examination showed similar marks upon other parts of the body. The corneal ulcer was recognized as the remnant of a smallpox vesicle. Investigation showed that there had been a number of cases of smallpox in this little city, the first one occurring early in July and being that of a young man from Grand Forks, who was home on a visit to his mother. The disease had remained isolated until the two young grocery men contracted it and carried it to their store to distribute with their goods to the entire community. At the time of this visit I found two very typical cases of smallpox, one being a man who had been under treatment in hospital for a compound fracture of the leg and had there contracted smallpox (the same source of infection as that for the boy with the corneal ulcer). He was at about the seventh day of the eruption: the other a young lady in the second day of eruption. In this latter case the eruption was quite extensive, and being governed by previous experience with smallpox, I predicted for her that she would undoubtedly be very sick during the progress of her disease. In this I was wrong. It could hardly be said that she had a sick day after that upon which I visited her. The temperature quickly fell to normal. The patient was decidedly marked with pigmented spots after her recovery from the disease. I have not seen her for nearly two years, but I venture to state that, judging from my knowledge of other cases, she in all probability shows but little marking from the disease at this time. The prediction I made as to the seriousness of this case was unfortunate, for the unbelievers in my diagnosis of smallpox used this as an argument against my ability to recognize this disease when present.

Much opposition to quarantine regulations, and in fact, to the diagnosis of smallpox, existed at this place. In consequence, the disease was not brought under control as it should have been. It continued in