

fifth or on the sixth day (sometimes a little later if the patient be a female,) the sputa become rust-coloured, and the oppression of the breathing rapidly increases. The quantity of blood becomes greater hour by hour, until the expectoration has the appearance of tar mixed with viscid mucus. In one case, to which we shall afterward have to refer, bright arterial blood welled from the mouth in the form of a fine froth for several hours. It was carefully ascertained that in this case there was no epistaxis. The urine about the same time becomes first tinged or smoky, and then loaded with dark coloured blood—never in the form of clots, but occasionally containing fine shreds. The stools toward the close contain blood in large amount, either in a tarry state intimately intermingled with feces or in a fluid state evidently shed from the lower bowel—the fecal matter, when distinguishable, being very pale in colour and clay-like.

The subcutaneous ecchymoses increase until large masses collect in a cellular tissue, distending it, and raising lumps as if of recent bruises. Sometimes this takes place in the forehead and eyebrows, causing them to overhang the eyes, and giving to the whole face a most repulsive expression.

Such a state never lasts long. The temperature, which has hitherto been six or seven degrees above the normal, suddenly falls beneath it; the pulse runs up until it is almost uncountable, frequently intermitting and very feeble; the respirations increase in frequency and decrease in efficiency, the air being but little carried into the lungs, though the struggles of the patient for breath are agonizing. Blood pours from all the mucous surfaces, and, oozing through the distended conjunctivæ trickles over the cheeks with the tears—giving to the face, already sunken and death-like, an aspect more disgusting than it is possible to describe, and causing one to wish for the termination which so soon relieves the sufferer. During the greater part of the time the patient retains his consciousness, and it is only at the very conclusion that the sufferings are veiled by the advent of semi-coma. In children I have seen obstinate bleeding from scrofulous ulcers on the neck. The blood shed was fluid and very dark in colour, and the bleeding was not controlled by touching the surface of the ulcers with nitrate of silver.

Until the end of May last not a single case was known to have recovered.

Before long I became satisfied that we had to deal, not with extraordinary virulence of the small-pox poison, but with its development in a peculiarly fitting soil; in fact, that it was not the epidemic nature of the disease, but the condition of the patient,