ondition of functional irritability of the brain is, perhaps, due to a similar cause. We are well aware that all these states may be quite independent of these remedies; but we believe that these conditions may arise from the improper use of remedial agents.

We do not mean to affirm that alkalies, when given so as to produce more free action of the kidneys and other glands, are not of service, nor that a free mercurial purgative is not also beneficial; but to administer ounce after ounce of alkaline remedy to neutralize so much lithic acid or lactic acid, because the perspiration and the urine are usually acid, is certainly neither physiological nor is its good result borne out by clinical experience.

Strumous subjects with rheumatism soon bear the preparations of steel with advantage, as the iodid of iron, the potash tartrate, &c.; and in some, especially chronic cases, cod-liver oil is of great value.

2. Periosteal disease is a common sequence of syphilis; and not only does the true periosteum become affected, but other fibroid tissues are implicated; pain is produced, and the patient is said to have rheumatism; but, besides this spurious rheumatism, persons who have been poisoned by syphilis are often the subjects of true rheumatic disease of the joints; the joints become red, swollen, and painful, and the malady presents all the characters of the simple ailment. We have, however, found that it subsides less easily, and is very apt to return on the slightest exposure to cold and wet.

In the treatment, alkalies are often of great value, especially the iodide of potassium; and, where there is diminished power, these alkaline remedies should be combined with quinine or or with bark in one or other form.

3. Whilst some altogether deny the existence of gonorrhœal rheumatism, others regard it as a form of pyæmia; gonorrhœa is, unfortunately, so common a disease, that very many hospital patients are found with it; and in many instances only a short period elapses before the symptoms of rheumatism are developed, or they arise whilst the discharge continues. What, however, is the relation of the two ailments? Is their occurrence a mere coincidence? or does the pain in the joints arise from a poisoned condition of blood allied to suppurative fever? Instances have occurred in which acute suppurative articular disease of a fatal kind has happened, several joints being involved, for which no cause could be traced but the gonorrhœa then existent. Still, whilst numerous instances of gonorrhœa occur without any articular affection, or any recognizable [illegible] the following instance shows the manner in which the veins sometimes became involved. A patient, some years ago, was admitted under my ca e into Guy's Hospital for acute pneumonia on the right side. The symptoms were well marked; and, with saline treatment (bicarbonate of potash), he speedily convalesced, and was about to leave the hospital. Fatal symptoms, however, very unexpectedly came on; for, after a good night and partaking of his usual breakfast, even assisting to clear away the breakfast things, he told the nurse that he was faint; he sat down upon the edge of his bed, and in about half an hour he died. The lung was recovering, as we expected, and the pneumonic deposit in it had become nearly absorbed; but we found, what had previously not been ascertained, that he had recently suffered from acute gonorrhœa. The veins at the base of the bladder were filled with adherent fibrin, the iliac and femoral veins were in a similar state; and a clot separated from these veins had been carried to the right ventricle, and the action of the heart became so embarassed as to cause speedy death. Rheumatism associated with gonorrhœa or gleet is, we believe, unusually persistent.

4. In persons of intemperate habits, whose vessels have become diseased and the viscera damaged, we have another cause for longer duration in an attack of rheumatism; but this obstinacy of character is still more manifest where—

5. The malady occurs at a period of life, when the vessels have become degenerated. Senile rheumatism has peculiarities, and one of them is greater persistency.

6. When persons who have resided in miasmatic districts become affected with rheumatism, there is a more marked periodicity in the symptoms: one day the skin being normal, the next clammy and perspiring, with rheumatic pains. We have witnessed, with enlarged spleen, sudden severe eruption on the skin, at first, in red blotches of roseola, and afterwards blebs, resembling rupia escharotica, showing that there was, at least, a peculiar cachexia, modifying the rheumatic affection.

7. Instances have been recorded, in which zymotic diseases, as typhus and typhoid, have been accompanied with rheumatism. I have never witnessed well marked instances of this kind; but there is nothing opposed to the known facts of disease, that an affection, having its origin in disordered metamorphic changes, should coexist with one arising from animal poison, as typhus. It must, however, be remembered, that some cases of pyæmia closely resemble typhus fever. A few months ago, a woman was under my care in the hospi-