

pock, containing a clear fluid. The vesicle also is quite hard, and those papules which terminate in a vesicle lose their inflammatory base. The rash may appear in all stages on the same patient; for example, in one area vesiculation may be present, while in another simply a papule; and then again, a small impalpable pigmented spot. The distribution is as yet indefinite, but in all cases they appear to be present and most abundant on the paralyzed limbs, and then again they seem to be scattered, but only sparsely, over the unaffected abdomen and chest, and occasionally on an unaffected upper extremity. They do not appear to follow any definite nerve segments, nor are they in the least painful to the touch.

Case 1.—The rash was present when the child was admitted, and the disease was then of four days' duration, and as far as could be noticed there was no further development of the vesicles. The temperature never rose above 99° , and fell the fourth day; and on the fifteenth day after admission the lesion had entirely disappeared. It was present on the outer side of the right and left leg, and on the external part of the dorsum of both feet, but more abundant on the right side.

Left leg completely paralyzed. Right leg had slight movement in every direction.

Case 2.—This patient's illness was of two days' duration, and when admitted the rash was easily discernible, but did not appear on any fresh areas, and could not be seen on the 18th day after admission. The temperature fell to normal on the second day, and never rose above 99° , except four days later, when it went to 101, then fell. This lesion showed a symmetrical distribution, viz., on the anterior and posterior surfaces of the right and left leg, and one or two on the dorsum of the feet; throughout, the rash was very feeble. Left leg was completely paralyzed. Right leg showed fair movement, but the reflexes were gone.

Case 3.—In this case, also, the disease had been present four days previous to admission, and at this stage presented the skin eruption, which did not show any further development. The temperature fell to normal on the third day, and never rose above 99° , but during the following weeks there was an occasional rise of temperature, attributed to intestinal disturbance. The rash showed typically and disappeared about the end of the second week after admission, being profuse over the dorsum of the right foot, tibial and calf surface. The right leg was completely paralyzed, the left leg feeble. Scattered papules were present over the trunk, while the rash also appeared on the right elbow and on the posterior