

Miliary abscesses may occur if life be sustained for a sufficient time.

3. The kidneys—of eleven cases only one seemed normal. All the rest showed as the most constant lesion necrosis of the epithelium of the convoluted tubules. Hyaline casts were common. Intracapsular inflammation, though rare, was noted.

4. The lungs—only one case seemed normal out of twelve. Almost constantly, lobular pneumonia of more or less severe grade was seen, with bacterial invasion of lung tissues often very luxuriant and hemorrhage, and sometimes consecutive atelectasis.

As regards relative importance, Booker finds, as clinical experience would lead us to expect, that lesions of the lung are the most serious. Next in importance are those of the kidney, while those of the liver and spleen are neither so constant nor so disabling. Booker states also that "a direct relation between the bacteria and the lesions in the solid organs is seldom demonstrable, except in the lungs. . . . In other organs the lesions resemble those resulting from the absorption of the toxalbumen products of bacteria," such as necrosis of kidney or liver epithelium.

It is accepted as proved that there is no specific organism of the disease, and a very important point is the fact now generally admitted, that the normal bacteria, particularly the *B. coli comm.*, may develop varieties of great toxicity. What the conditions are that produce this variant growth is not yet known. But one proof of the truth of this view lies in the report made by Lesage on his attempts at the serum treatment of infantile diarrhea, in *Rev. de Therap. Med. Chir.*, No. 24, 1896. His serum was obtained from asses after injection with colon bacilli from virulent milk or stools. Twenty-six out of fifty-two children treated with this serum (exactly 50 per cent.) lost all marked symptoms in less than forty-eight hours, fourteen were improved, and twelve unimproved. In all cases where the stools were green the color disappeared after the injections, and what is singular, unless the theory of variation in toxicity of colon bacilli be wrong, he found that the serum obtained from asses after treatment with the colon bacilli of normal stools did not give these results. (Blackader, in Sajous' *Cyclop. Pract. Med.*, Vol. IV.)

As regards the third main head in the plan of this paper, namely, classification, I beg you to bear with me if I first of all lay what may seem to be undue stress upon the importance of it. Diagnosis, oftentimes sufficiently difficult in concrete cases, is manifestly impossible unless we carry in our heads clear conceptions of the varieties of the disorder. Of course we assume that typhoid fever, the acute specific fevers, particularly scarlet fever and pneumonia, and intussusception, are all excluded.