

*Case I.* Male, aged 23, was admitted complaining of "rheumatism." He had been in good health up to six months before admission, when he became infected in the urethra. Three weeks after infection he developed pains in the right ankle, which, becoming swollen and hot has been permanently affected. Shortly after, the right knee became involved, and a few days later the right shoulder. One month later almost all the joints of the body were attacked including the temporo-maxillary and the sterno-clavicular articulations. Thereafter his condition remained about the same throughout the six months, at times better and then again much worse. About the same time that the joints became affected, both eyes became red, painful, and lachrymose, and a purulent discharge, sealing the lids together in the morning, was present.

In the past history of this patient there is no evidence of rheumatism of chorea, nor of previous venereal affection.

The condition, on admission, was one of extreme emaciation, the extremities showing a most marked atrophy of muscles, making the joints appear abnormally large. There was partial ankylosis of the jaw, with tenderness and swelling over the sterno- and acromio-clavicular joints. Some of the smaller joints of the hands were swollen and tender. The vertebral articulations were painful on movement. The right eye was free, while the left eye showed an iritis.

*Urine.* There was urgency and frequency with pus on examination. An examination under ether resulted in the diagnosis of vesiculitis, cystitis, and posterior urethritis.

The patient had no other complications, and under treatment,—both local and general, made satisfactory progress, gaining upwards of twelve pounds in two weeks. Throughout his stay in the hospital, which extended over eight weeks, his temperature was rarely above normal.

This case presents the features of general gonorrhoeal infection as manifest in polyarthritis, in which the smaller as well as the larger joints were involved, and in which, too, those joints more rarely infected were involved, such as the temporo-maxillary, sterno- and acromio-clavicular. It shows as well, early iritis with conjunctivitis recurring throughout the course of the disease.

*Case II.* C., male, aged 33. This patient also complained of "rheumatism." However, this resolved itself into more definite complaints of pain and stiffness between the shoulders, in the lumbar region and in the heels and neck. In his personal as well as in his family history acute inflammatory rheumatism was frequently found. He had two attacks of inflammatory rheumatism previous to 1894, when he was first