

preliminary symptoms are gastro-intestinal in character, the other marked by manifest indications of acute infection, with inflammatory lesions of the throat, nose and bronchial tubes. The former we may designate a gastro-intestinal form, the latter catarrhal.

**THE GASTRO-INTESTINAL FORM.**--In this variety we have found among the conspicuous symptoms vomiting, epigastric pain, purgation and high fever. The vomiting has been in most cases the primary symptom, unless there were vague discomfort preceding it and of such slight moment that it had almost escaped the attention of the patient. The stomach becomes completely unretentive, and even when no attempt has been made to take food, retching continues and small quantities of thin mucous liquid are regurgitated. At the same time the patient complains of more or less marked tenderness in the epigastrium. There is not usually pain, except on pressure, and the tenderness is rather sharply localized to the stomach. Soon after the onset of vomiting, or in other cases some hours later, diarrhoea sets in and takes the form of more or less pronounced serous purging. The two symptoms, vomiting and purging, continue for a day or two or several days and reduce the patient's vitality greatly. During the same time the temperature rises rapidly and reaches an elevation of  $103^{\circ}$  or  $105^{\circ}$ , not rarely the latter. After the preliminary gastro-intestinal symptoms have somewhat subsided, the temperature declines and the case progresses without necessarily presenting marked or peculiar features.

**CATARRHAL FORM.**--Cases of this description begin very much as do some forms of influenza, and we have been greatly puzzled during the first week to reach a satisfactory diagnosis. As a rule there is chilliness or a distinct chill at the beginning and after some definite exposure; then follow redness and swelling of the mucous membranes of the pharynx and tonsils, pain on pressure beneath the angle of the jaw and on swallowing, more or less coryza, swelling and injection of the conjunctivæ and bronchitis. The temperature rises rather abruptly and may become as high as  $104^{\circ}$ , though more frequently it falls short of this. The patients complain of pain in head and in the limbs, backache and wretchedness. The most annoying symptom, perhaps, is the "bursting headache." The pulse rises in frequency, but it is not in keeping with the temperature. The patient loses his appetite almost completely, although we have met with exceptions to this rule. The tongue is slightly furred, and there is nearly always localized tenderness in the epigastrium. The patient, as a rule, states that he had been absolutely well until the initial chill, but in some cases there is a history of a slight indisposition for several days, or even weeks.