

ART. II.—*Sketches of the Endemic Fever of Upper Canada, &c* By JOHN JARRON, Esq., Surgeon, Dunnville. Continued from p. 477, vol. 1.

In the early part of this sketch I pointed out the most prominent distinction between the malarious fevers of the old and of the new world, the one being usually marked by the prevalence of some local inflammation, and the other by the excessive derangement of the secretions of the primæ viæ and consequent symptoms so characteristic of yellow fevers. We further find such fevers occurring in any quarter of the globe, exhibiting such distinctive marks as to lead many to class them as distinct diseases, and even in the East Indies, where the characters of fevers are reported on by men of science and experience, there is scarcely a district in which some marked difference is not to be met with. In the new world, the effects of malaria exhibit perhaps more varieties than in the old. The southern parts and maritime coasts have their yellow fevers, gradually passing into the common remittent as you recede from the sea and reach the interior even of the islands. On such an extensive continent as North America, with its numerous fresh water lakes and large sluggish rivers, so fertile of that peculiar malaria, giving rise to paroxysmal fevers, a like result is produced, and the endemic diseases of each state exhibit such a difference that separate names are too often applied, not only to them, but to the fevers of almost every lake and river in the country.

Much of this variety is the result of general causes, among which the heat and moisture of the climate, and the character and state of the soil in localities, are the most prominent, the influence of the lakes and rivers being always productive of serious and complicated typhus, but in newly settled and uncultivated districts of a different character, an equally severe variety of fever is often found to prevail.

Though these facts are acknowledged by most writers on paroxysmal fevers, and the results occasionally brought most prominently forward, it has often struck me that the causes of such distinctions have in a great measure been overlooked, and are still involved in the greatest obscurity, which is not likely to be lessened so long as the idea generally prevails of the origin of paroxysmal and bilious diseases from something to which the name of malaria has been given, and that the severity of such affections depends on the quantity of the noxious poison to which the body has been exposed, or which has been inhaled by the system. A very slight acquaintance with the diseases of malarious localities will plainly prove that their distinctive marks are to be ascribed far more to some variety of the nature, however subtle, of the poison, than to the quantity imbibed by a particular body, as the passage of a jungle, or the spending of an hour in a malarious spot, will often give rise to a peculiar fever in an individual who had long inhabited a neighbourhood in which the poison was as fully developed. We are too much in the dark about the real character of this subtle poison emanating from the soil, to which the name of malaria is usually applied, to attempt any speculation on the variation of its composition in any particular locality. It is one of the many causes of disease, the existence of which is too frequently only revealed by its effects; and any attempt to account for the many varieties of local fevers, by the latitude of places, or the peculiarity of a country would be nearly as