

The more we inquire of the Microscopist concerning the form and nature of the Pus Corpuscle, the more firmly convinced do we become in the opinion that it possesses no definite or distinctive marks sufficient to render it very easily recognizable from other floating bodies, and indeed, from its general history there is much that would induce us to attribute its formation rather to a degeneracy of formative force, than to any power in the system to set up a new secretion, or to any exaltation of the formative force; on the contrary, the behaviour of effusions and the changes which take place in them, are sufficient to induce the inquiry, whether the pus corpuscles is ever thrown off as such, or whether the change does not take place afterwards?

Perhaps few observers have paid greater attention to the subject than Professor Vogel and Mr. Paget, to whose investigations it is necessary to refer. But firstly let us review the changes which take place in exuded plasma. Vogel observes that "the fluid in blisters produced by burns, or the ordinary vesicants, (independently of minute flocculi, consisting of coagulated fibrin, pus-corpuscles, lymph-cells and epithelium cells) is clear, and sometimes of a yellowish green colour, communicates a blue tint to reddened litmus paper, and in addition to its principal constituent *albumen* contains a little fat extractive matters and the ordinary salts of the serum of the blood." In his chapter on "Dropsies," Vogel has with much reason, attempted to shew that the quantity of the exuded plasma is dependent on the condition of the class of vessels principally affected, for he asks, "Since the serous, and also the fibrinous fluids, take their origin from the blood, and are produced by the permeation of its fluid constituents through the walls of the vessels, how is it that in some cases we have one and in other, the other form of effusion?" In the present state of our knowledge, this question cannot be satisfactorily answered; there is, however, every probability that it admits of this solution:—That serous dropsy owes its origin to a permeation of the fluid of the blood through the walls of the veins, while fibrinous dropsy arises from a similar permeation through the walls of the capillary system.

In favour of this view may be urged, firstly, the different properties of the walls of these two divisions of the vascular system. The veins have thick walls, consisting of several layers of cells and fibres, while the walls of the capillaries are very thin and delicate. It is true, that we cannot accurately estimate the differences in their endosmotic properties, but from analogy (from all the experiments that have been made in this department,) we may conclude that the product of endosmosis, in the former case, is more dilute and poorer in solid constituents; and that in the latter, it is more concentrated and abundant in them. Secondly, as we have already shown that serous dropsy is associated with dilatation of the veins and attenuation of their walls, so we learn from microscopic examination of the capillary system, that a dilatation of those vessels and an attenuated condition of their walls, precedes, and is associated with the occurrence of the fibrinous fluid, either in the parenchyma of an organ, or in a cavity. The simultaneous occurrence of the effusion, and the modified condition of the vessels