

half the cases injection of the conjunctiva. Pyrexia is notably absent and, although, in some cases, there is arterial excitement this appears merely fortuitous and like the sore throat, nausea, urticaria, &c., which we sometimes meet with in cases of Rôtheln, not a symptom of Rôtheln, but indicating a condition of the system which would have manifested itself independent of the epidemic, or perhaps a complication arising from the presence of another epidemic, such as influenza. One symptom, however, is nearly constant, viz., giddiness, and is almost the only constitutional symptom in the disease. Children with Rôtheln will engage in their usual amusements, eat heartily, and sleep well, and covered with the lentil rash will complain of nothing but a feeling of staggering. But so constant is this symptom that when children repudiate the idea of feeling unwell the parents can almost invariably remind them of the giddy feeling when cross-examined.

Although the exanthema is said "to differ in no respect from that of morbilli," I think I may safely affirm that the rash is more papulous, larger, more un-uniform, and of a darker colour. It is very irregular in its distribution, causes considerable itching and disappears at the end of the first or at the most the second day of the disease. I have had a case where it returned after an interval of ten weeks, other cases being in the same family at both periods. There are no sequelæ to this disease. Vogel remarks that this disease is "not immediately preceded nor soon followed by any epidemic of measles or scarlatina." This remark must have been founded on evidence merely negative for we have recently been afflicted in this vicinity with an epidemic of scarlet fever of a most malignant type, and following the law of probabilities, after having within a limited space of time been visited by puerperal fever, erysipelas, scarlatina, parotiditis, whooping cough, influenza, &c., we are quite prepared to be told of cases of measles, and, indeed in the surrounding country cases of morbilli are reported. One circumstance, however, is worthy of notice, that not one of the patients with Rôtheln was attacked with scarlatina during the recent epidemic. Most of them had previously had either scarlet fever, or measles, or both, and, although some were supposed to have had scarlatina *sine eruptione* during the late epidemic, this I doubt for the disease was too well marked to be masked. This evidence, like Vogel's, however, is merely negative.