many had their constitutions impaired and predisposed to a variety of other diseases.

In recent times we have the history of an epidemic in Monttreal nearly as bad, if not quite, as above cited. There in 1885-86 over three thousand died, making 31.3 per cent. of those affected. Up until 1889 the mortality in Ontario averaged 30

per cent.

From then until the present, however, we have to record the occurrence of hundreds of cases of a much milder type occurring throughout the province. Amongst these the mortality ranged from .50 to little less than 1 per cent., a great drop from previous percentages. The reason of this immense decrease in virulence is not known. Some believe this to be caused by the effect of vaccination, and as shall be shown, vaccination has a marked effect. Dr. Hodgetts believes that the present decrease has been too sudden to be accounted for in this way, and some other reason remains to be discovered.

In the spring of 1903 I took charge of an outbreak of small-pox just west of Berlin. This was an offshoot from the Galt epidemic of that time, which will be remembered as having caused considerable anxiety because of return to something like the old-time mortality. These cases did not originate from the New Ontario lumber-camps, as have most of the cases in the last ten years, but were traced to one of the Old World seaports, the disease having been brought to New York by a sailor and carried here by someone from the former city.

As a full consideration of variola would make a lengthy paper, this will include only two of the most important phases of the subject, its symptomatology and diagnosis; also some of the most typical temperatures and clinical charts will be presented. Among the cases observed were to be found examples of mild and severe, or discrete and confluent variola, examples of varioloid, a small-pox modified by vaccination, and possibly an example of vaccinia, a small-pox modified by passing through the cow and induced in man by vaccination with bovine lymph, or again by inoculation with bovine lymph containing small-pox virus and secured from someone suffering from small-pox.

True small-pox, variola vera, presents surprisingly varied symptoms clinically, and this fact has in the past led to many

errors in its diagnosis.

Speaking generally, the period of incubation has been twelve days, but many cases have been observed exceeding this by two, three or five days; and again others, where a shortage of a similar number of days under the usual twelve has occurred. So that cases are on record with incubation periods extending from eight to twenty days. In one of my cases, the only exposure to infection that could be determined occurred twenty