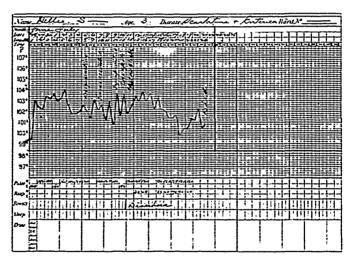
sore throat, headache, etc., on June 20th ; her pulse was rapid (120). temperature 100°, and tongue coated with white fur.

Next day (21st) throat was still very sore and there was some slight enlargement of the cervical glands; her tongue was beginning to clean from the tip, leaving the reddened papillæ very prominent; the pulse was still rapid but no rash had developed, and her temperature was normal. During the rest of the week no change in her condition occurred other than a gradual return to the normal pulse rate, and a complete clearing of the tongue, leaving prominent the swollen and reddened papillæ.

On the morning of the 22nd her sister was taken ill with the same initial symptoms, and subsequently passed through an ordinary attack of scarlatina.



On the 27th the first child again became ill, being irritable and restless, and having some headache and vomiting; temperature 99.3. Next morning her throat was sore and pulse rapid (144). The tongue did not become recoated, but retained its red strawberry appearance. Towards evening the typical scarlatinal eruption made its appearance on the chest and quickly extended over the whole body; temperature 103°. The subsequent range of temperature and pulse rate are best described on the accompanying chart.

But for very severe cervical adenitis the case was uneventful till the end of the first week, when the temperature, which had fallen to  $100.4^\circ$ , began very gradually to ascend. The child became dull and listless with delirium at night, and the bowels were inclined to be loose.