

valuable examples of this class, but almost any pathological process of the organs, if sufficiently chronic, may be unattended by pain, and it is for some functional disturbance that the physician is first consulted. No absolute rule, however, can be formulated, and it is plain that the location of the nerve growth and its relation to nerves, will determine to a great extent the existence of pain, so that in some cases the pain may be severe at an early stage. In many diseases of the nervous system, pain is absent, though not invariably, and when present is often of great value in determining the nature and extent of the lesion.

The absence of any reaction to painful sensation is pathognomonic of syringomyelia, although in the classical onset of the disease, there are irregular pains.

The second class includes in a general way acute affections and acute systemic disorders, in which pain is usually present from the onset, but only incidentally, so to speak, the severity of the other symptoms leading us to expect a sensory disorder. Anyone will have noticed how much acute infectious disorders, whether local or general, resemble each other in the onset, and pain in the back and legs may be ascribed to a symptom more or less common to all. Naturally such a symptom present in so many diseases will furnish no diagnosis beyond referring the condition under investigation to a general class of ailments, but which is frequently more easily affected by the other symptoms present. Headaches are also a manifestation of pain common in acute disturbances, but their causes are so manifold and their location and character or quality vary so widely, that a separate consideration would be necessary to do justice to the subject.

In small-pox, influenza and dengue, this initial pain is especially marked, and in small-pox, "Severe pain, chiefly in the lumbar region, accompanied by severe frontal headache and vomiting, justifies precautionary measures in an epidemic before the eruption is present" (Osler). The most prominent symptom of influenza is usually the general soreness of which its victims complain, and dengue has obtained the name of "break-bone fever," on account of the pain in the muscles and joints and its severe boring character in the bones.

Although the disturbance be of very great severity, it does not furnish sufficient evidence for a definite diagnosis, as these affections may not manifest pain to such an extreme degree, and also the geographical locality or presence of an epidemic must be considered. Moreover, other fevers in certain individuals may show an exaggerated condition of their usual onset. Acute inflammatory disorders of some of the viscera, such as the kidney, may show a certain amount of accompanying pain, which occasionally is very suggestive.