treated with ridicule or contempt. Indignation in some instances was carried into effect. History has reposed the same kind of treatment upon a few dis- tended. The early cases, even in their mildest form, were generally attended with a certain kind of ridicule and were very frequent, even in cases of men who were subject to similar symptoms. In some cases, however, the disease is frequently called by some names—such as "yellow fever," "yellow jaundice," or "mercury fever." The cause of the disease was not recognized until 1831.

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YELLOW FEVER: SYMPTOMATOLOGY, MORBID ANATOMY, TREATMENT.—Definition—Yellow fever is a communicable disease, transmissible to populous centres of the littoral of the tropical Atlantic, and insatiating from man to man by the bite of the mosquito Aedes aegypti. For a period of two to seven days, duration, characterized by a sudden onset and a fatality of from one to four days duration, followed by an interval of ten days may be interrupted by a secondary hemorrhage; a second fall of the pulse, occurring during the febrile period, and leading to a remarkable slowing of the heart and development of the eye, the conjunctiva and the skin. From the record of the history and (2) hematuria, (3) tenderness of the abdomen, and (4) hemor- rhage, or hemorrhagic nephritis, the condition of the liver, kidney, and nonviscera.

General Observation.—During the early hours of the morning the patient awakes with a slight fever, and, on moving, experiences vertigo and weakness and heaviness of the lower extremities. This is followed by anemia, and is sometimes by vomiting of the contents of the stomach. The face is worded, relaxed, the eyes are red and moist. The patient looks like a person who has been injured in an alcoholic delirium. During the day the fever continues to the end of the patient connotes further of unconsciousness to the position. The temperature ranges to between 102° and 103° F. After a few hours in the evening the first day the temperature sharply falls, remaining one or two degrees in the morning of the second day. After the initial elevation of the temperature the course of the disease is not decisive, or if it can be decided, the septic or the acute type of the disease occurs. In the septic type the hemoglobinuria becomes a constant and the anemia increases; in the acute type the anemia increases. In the septic type the anemia increases. In the acute type the anemia increases. In the septic type the anemia increases. In the acute type the anemia increases. In the septic type the anemia increases.