

ever, some remaining for examination, which are partly of a practical, partly of a scientific interest. Under the name *chyluria*, mention is made of the *Filaria sanguinis hominis*, a parasite discovered by Dr. T. R. Lewis. An endemic haematuria occurs at the Cape of Good Hope and other parts of the African Continent, which is caused by a fluke, called after its discoverer, Dr. Bilharz, of Cairo, the *Bilharzia hematobia*. This parasite is found in the veins of the portal system and in the bladder, and causes haematuria.

Certain trematode parasites, commonly known as *flukes*, are sometimes found in the human body, notably in the liver. About twenty cases of *distoma hepaticum* have been recorded, several by Professor Joseph Leidy, M. D., of Philadelphia, and they may therefore be encountered in this country. Besides their usual abode in the liver-ducts and gall-bladder, they have been found under the skin behind the ear, under the scalp, and in the sole of the foot.

Of greater practical importance to the physicians of this country, especially of the Southern States, is the *chigoe*, or popularly the *jigger* or *sand-flea*. The popular notion is so far true that this parasite really belongs to the flea tribe, and is named *Pulex penetrans*. It inhabits by preference a dry, sandy soil, and is exceedingly prolific. It deserves to have the adjective *penetrans* appended to *pulex*. They bore into the skin of the feet, especially under the nails and between the toes, where the softer integument permits more ready penetration. The impregnated female, thus deposited under the skin, swells to considerable size, and excites a violent local inflammation, suppuration, and sloughing. The larvæ also, deposited in open wounds and ulcers, excite unhealthy and destructive inflammation. The bones finally become diseased, and toes may slough off, or an extremity may be lost by a necessary amputation.

It follows, from these considerations, that when a jigger penetrates the skin it should be removed with the utmost care, so that no portion of it, or any of its larvæ, be permitted to remain behind. If the parasite is not successfully removed, its destruction by carbolic acid, or sulphurous-acid lotions, should be attempted.

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