

recovery, the physician may expect on his next visit to find the room filled with chattering women, who have gathered to speculate on the possibilities of a recovery or each to recommend the decoction which cured some one else, whose case was "just like this." There is but little watching done at night in the most severe cases, and a physician is seldom called up at night to see a patient.

On my first introduction to the *andaroon*, I had little acquaintance with either Persian customs or costumes. I had been asked to see the wife of a high dignitary, and on my arrival was at once ushered into her presence. I found my fair patient awaiting me, standing beside a fountain, in the midst of a garden quite Oriental in its features. She was closely veiled, but her feet and legs were bare, and her skirts were so economically abbreviated as at first to raise the question in my mind, whether I had not by mistake of the servant been announced before the lady had completed her toilet. She, however, held out her hand, which apparently she did not intend me to shake, and I presently made out that I was expected to feel her pulse as the preliminary to my inquiries concerning her symptoms; or rather in lieu of them, the competent Persian physician needing no other clue to the diagnosis. Then the pulse of the other wrist had to be examined, and I inspected the tongue, of which I obtained a glimpse between the skilfully disposed folds of the veil. This woman had been suffering from a ma-