

the morbid changes in one or other tissues from the onset of the disease to its culmination—a principle identical in the infant and in the aged. So we can with syphilis—only habitually we do not. We treat and regard it as a something distinct.

Take, for instance, that disease which, in its chronicity as in the lesions which characterize it, most closely resemble syphilis—tuberculosis. From the onset to the end, at every stage, from the primary lesion to the most extensive generalization of the process, we see one morbid change at work, namely, the focal multiplication of the bacilli leading to the development of tubercles. It is true that according to circumstances these tubercles may vary in their characters from a condition in which small cell infiltration is so extensive as closely to approximate to miliary abscess formation, through conditions of so-called epithelioid cell overgrowth to a state in which fibroid connective tissue development is so excessive as to mask everything else, save, perhaps, necrosis and caseation. But the fact remains that we do not sharply differentiate successive stages of the disease, or consider that the successive stages are characterized by the development of specific manifestations. At the most, in one organ, the lungs, we trace such-successive stages of the tubercular process, but we never think of laying down that what is to be made out in the lungs obtains for other organs, and for the body in general. On the contrary, a study of pulmonary phthisis alone has convinced us that the course of tuberculosis varies so greatly according to the interaction of two factors—the condition or reactive power of the tissues, and the virulence of the bacilli—that to attempt to plot out the course of the disease in each case into well-defined stages is an impossibility.

With syphilis it is quite another thing. From Ricord onwards a primary, secondary and tertiary stage have been clearly distinguished, and not only this, but according as to whether the disease is acquired in post-natal life, or has seized upon the individual while in the mother's womb, so do we recognize two different types of the disease.

There is, I take it, no more firmly "fixed idea" in the whole of medicine than that of the absolute existence of these different stages and forms of syphilis. To-day, I do not want to pose as a revolutionist and an iconoclast, for speaking broadly, and regarding the bulk of the evidence before us, I, like all others, must acknowledge the utility of the divisions. But there is a danger in these fixed ideas, in medicine as in all sublunary affairs, and, to say the least, it is of benefit occasionally to enquire whether what is accepted of