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ORIGINAL COMMUNICATIONS.

ART. XXVIII.—*Therapeutical Contributions.* By WM. WRIGHT, M.D.,
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sician to the Montreal General Hospital, &c.

(Continued from page 290.)

Reverting to the position, previously maintained, that anti-syphilitics were only suitable for regular syphilis; I shall now proceed to point out the outward manifestations which, when afforded by disease of this kind, serve as reliable suggestions for the right use of these agents.

In strict correspondence with the stages of the disorder, as conventionally received, the indications for the remedy are, necessarily, of a triple order: primary, secondary, and tertiary.

Primary.—These are denoted by simple chancre and also by the areolar, indurated phagedenic, Hunterian, ulcer elevatura, persistent, and "blue nob." For, the six last named are, I believe, all varieties of the simple type and proceed, merely, from a disproportion in the different actions which may be observed in it. The areolar, when the exudative (fibrinous) action is unusually active in the circumference. The indurated phagedenic, when this reaches such a degree that the subjacent vessels are compressed, and the contained ulcer is deprived of its proper nourishment. The Hunterian, when the same exudation extends beneath the ulcer as well, as round the edges, causing the sore to appear as if it were set in a cup of cartilage. The elevated, when during reparation the granulations are more or less raised above the level of the surface. Persistent, when there has been a tendency to reproduction of ulceration after cicatrization has occurred, or when the ulcer enlarges on one side and heals on the other. Blue nob of Mr. Colles, when the new cuticle becomes so accumulated as to appear like a mucous tubercle. In every one of these species of chancre, anti-syphilitics may be properly employed. They may also be used in the ulcers of irregu-