

to the virus of tuberculosis. The caseous matter appears to be an excellent nucleus for the development of bacteria. It is difficult to say whether the virus in some different form might not be carried over from one generation to another through the ovum or semen, in the same way as in syphilis.

From the experiments made, there is no doubt that bacteria exist in tuberculosis. So far as yet known they do not exist in any other form of disease. That they are the cause of the disease seems probable. No authority has yet been able to contradict Koch's assertion. In fact, the results of the investigations so far go still more strongly to confirm it. If after thorough investigation it should be finally confirmed, a great advance will be made towards the prevention of this frequent and fatal disease.

ANTISEPTIC TREATMENT OF PHTHISIS.

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Phthisis is now being treated, with reported success, by the continuous inhalation of the vapour of carbolic acid or other antiseptic agents, by means of an almost constantly-worn respirator.

"It is fair to infer," says the *British Medical Journal*, "that the application to internal suppurating surfaces of an agent which has been used in similar cases externally with such benefit, will be equally efficacious in checking the growth and development of morbid germs, and thus allowing tissues to be reconstructed."

Recent researches on tubercular disease, and the nature of tubercle, have excited great attention, and the teachings of some of the German pathologists, notably Virchow, are subversive of what we have been taught regarding its existence, and especially with regard to the relation which it sustains to inflammatory processes, some of the leading pathologists maintaining the view that the inflammatory process is primary to tubercle, and utterly denying the tubercular nature of many of the processes engaged in phthisis

pulmonalis. Without attempting to give the views recently enunciated by them in this extensive field of enquiry, I would like to draw the attention of the Association to a comparatively new method of treatment with which general practitioners are more immediately concerned, and which has been used during the past two years, with a considerable degree of success, by Dr. McKenzie, of Edinburgh, Dr. Williams, of London, and others. They were probably led to adopt this method of treatment from the views recently set forth as to the septic and eminently contagious character of tubercle,—I allude to the inhalation of the vapour of carbolic acid or other antiseptic agents for lengthened periods, as practised by Dr. McKenzie with apparently highly beneficial results. The inhalation of vapours in lung diseases has long been practised, but the mode of administration has been so defective that the practice has to a great extent fallen into disuse. It has also been adopted by advertising charlatans in an imperfect way, and has thus helped to bring it into undeserved disrepute with the profession. It is now, however, as a rational method of treatment extensively employed by leading and eminent medical men with no doubt the happiest results.

Late investigation goes to show that phthisis pulmonalis is eminently contagious, and may be propagated by direct infection from man to man.

Dr. Reich observed "in the Village of Neienburg, situated on a high bluff of the Rhine, and enjoying excellent hygienic conditions, from July 11th, 1876, till Sept. 29th, 1877, ten deaths from tubercular meningitis in children born between April 4th, 1876, and May 6th, 1877. No hereditary disposition could be established. All these children were attended by the same midwife, suffering from lung disease (caverns, and sanio purulent sputa). She died July 23rd, 1877. She had the bad habit when a child was born of removing the phlegm from the respiratory passages by aspiration with her mouth, and in slight cases of asphyxia of blowing air into the child's mouth."

Schuler, of Griefswald, has proved that animals in which artificial tuberculosis has been induced by injection, die without exception,