

posterior spinal sclerosis. We know how these states consequent on impaired nutrition bring about abnormal conditions of the joints—such as fractures consequent on want of appropriation of animal matter to give the bones elasticity, and even dislocations from want of tone in the surrounding tissues of the joints. Those who have charge of the insane need not be told how the least pressure or blow will produce ecchymosis, and a slight force will be followed by fracture of bone, in some brain diseases. Metastasis of so many ailments is no doubt due to changes following mal-nutrition and the cause of these degenerations is in depreciated nerve supply from these great centers of influence. The initiatory diseased impulses are given from these centers, but must however be always distinguished from those produced by abnormal conditions at the periphery of the nerve apparatus, and followed by vascular changes consequent thereon. Such as the latter are brought about by vaso-motor irritation, and differ materially from the conditions of the “trophic centers” as causes of disease from diminished nutrition. For example, such a disease as Addison’s is only a result of trophic disorder of the sympathetic and ganglionic centers. The nervous condition always antedates the pathological changes in the supra-renal capsules. In other words, the difference lies in centric and eccentric causes. I am not sure but glycosuria may be primarily a disease of trophic origin. We know how often it is accompanied with such diseases as phthisis, pneumonia, ulceration of the bowels and suppurative kidneys. The diabetic coma, which is so sudden in its invasion, can not be accounted for from the local disease. The acetonaemia indicates either chemical changes in the blood or organic influence in the liver, but in both cases the active agent is nerve stimulation.