

that the disease may be limited to the primary cutaneous manifestation not followed by secondary lesions.

(4) That as with tuberculosis so with syphilis, the congenital form of the disease begins at what may be termed the secondary stage of the acquired disease, *i.e.*, the stage of general dissemination of the virus through the organism.

THE RELATIONSHIP BETWEEN SECONDARY AND TERTIARY SYPHILIS.

I would now pass on to consider the relationship between the secondary and tertiary stages of syphilis.

Where in any infectious diseases we have widespread eruptions, affecting both skin and mucous membranes, we now feel assured that such eruptions are due either to the irritation set up by the actual presence and growth of the specific germs of that disease in the sub-cutaneous and submucous layers, or to the irritation produced by the products of these germs growing in other parts of the system. And the more we study infections of which we can isolate the specific microbes (streptococcus and pyococcus infections, typhoid, &c.), the more we find the first of these alternatives in force, and in the case of syphilitic eruptions, the fact that the cutaneous eruptions are infective, affords clear evidence that the specific virus is present in them.

Such generalised infections of the skin and mucus membranes can only be brought about through the agency of the blood stream, or, otherwise, what is termed the secondary stage of post-natal, acquired syphilis, is the stage of general dissemination of the virus through the system by the blood stream, and of the more immediate results of such dissemination. What has been described as the second period of incubation (the interval elapsing between the development of the chancre and the appearance of syphilodermiæ) is the period requisite for the virus to infect and traverse the lymphatic system on its way from the primary lesion into the blood stream, and then to proliferate in the cutaneous and other tissues up to such a point that eventually it produces a reaction.

It is usually held that the syphilitic virus now especially affects the skin and mucosæ, and that the abundant and varied crop of syphilides—of syphilodermiæ—are the peculiar sign of the second stage, gummatus and more fibrous growths being characteristic tertiary developments. Certainly the eruptions are the prominent features of the secondary stage, but it is too much left out of account that in the early stages of generalisation of the disease, the internal organs may be, and perchance often are, affected. And what I wish more especially to bring before you this evening is this lack of sharp definition