

From this time onward different observers have described the disease more or less minutely.

During the seventeenth and eighteenth centuries there were many observers who noted a difference in their fever cases and described "a slow, nervous fever arising from an ulcer in the bowels."

This nervous fever or low continued fever as it was then called was noticed to differ from the true typhus in its not being contagious.

Differences between typhus and typhoid were pointed out by Strother, Gilchrist, Languish, Huxham, and Sir Richard Manningham from 1729 to 1746 and by Willan in 1799.

In France, Prost and Broussais, from 1804 to 1810 considered it a gastro-enteritis, and following the prevailing notions of their day advocated free blood-letting.

In 1813, Petit and Seres advanced the view that the "felris nervosa" was not a simple enteritis, but an enteritis limited to the ilium and of specific origin.

Brittonneau in 1818 at Tours made a series of post-mortems which proved to him that the solitary and agminated glands of the ilium were always implicated, and in this particular differed from other forms of enteritis and was due to a specific poison.

This was a marked advance and served to stimulate others to further research and more careful observations on the cadaver.

In Louis' work in 1836 we find a number of cases reported where careful autopsies had been made and morbid conditions noted in all the organs of the body and comparison made with conditions found in death from all causes. His report shows the ulcers in the lower part of the ilium to be constant, the most advanced ulcers the lowest down; and as he followed up the bowel, toward the jejunum the changes became less marked and ulceration gave place to swelling and inflammation of Peyer's patches and the solitary glands.

During this same period from 1800 to 1836 many English, German and American physicians, such as Sutton, Williams, Muir, Bateman, Abercrombie, Hewitt, Bright, Tweedie, Smith, Gerrard, Penrock, Bartlet and Hildenbrand were making observations and gradually coming to the same conclusions.

Sir Wm. Jenner, in a series of papers, from 1849 to 1852 did much to settle matters and declare typhoid fever a disease *sui generis*, differing entirely in causation and pathology from typhus. While typhoid fever was long thought due to a specific poison of some kind, it was not till 1880, when Eberth discovered the bacillus, that we had a definite idea of the nature of that poison.

Since this discovery numerous researches have served to confirm