TWO CASES OF SYPHILIS HAVING A BEARING ON THE QUESTION OF THE PERIOD DURING WHICH THE DISEASE IS COMMUNICABLE.

BY JAMES BELL, M. D.,

Assistant Professor of Surgery and Clinical Surgery, McGill University; Surgeon to the Royal Victoria Hospital and Consulting Surgeon to the Montreal General Hospital.

HIS communication is merely a report of facts which I have had the opportunity of observing under such exceptional circumstances as to lead me to the conclusion that they may be accepted as absolutely reliable, and of such a nature as to add to our knowledge of some of the more obscure problems presented by this protean disease.

They are as follows: 1. A case of transmission of syphilis from the male two years after the disappearance of all lesions.

A gentleman well known to me for years socially as well as professionally, a healthy, strong, active, and athletic man with a good family history, aged about thirty years—a club man, and what might be called a high liver, although rather abstemious in the matter of alcoholic beverages-presented himself on the 3d of March, 1886, with a well-marked and characteristic primary sore. I had previously treated him occasionally for slight attacks of eczema, sometimes on the forearms and sometimes on the legs, but never severe or persistent. I frankly stated my diagnosis, told him what he had to expect in the way of prolonged treatment, and encouraged him with a favorable prognosis. I advised total abstinence from alcohol and tobacco, and regular but good living. I gave no medicine, but instructed him to present himself once a week for examination. On the 9th of June he presented himself with the typical skin, glandular, and throat symptoms, and treatment was then begun. The treatment was at first hydrargyrum eum creta three times daily, which after about three weeks was replaced by protiodide of mercury pills, beginning with a quarter of a grain three times a day and increasing it up to half a grain within a few weeks. This was continued for some months, then