

present under my care in St. Michael's Hospital. Some of these cases are so resistant to mercury and iodide as often to make one doubt their real cause, but these cases may yield in time to persistent treatment to the limit of tolerance. Fordyce insists on the value of Salvarsan in these resistant nervous cases.

In no condition, apart from tumor, does one see such intense headache as in cerebral syphilis. Examination of the eye grounds should of course always be made.

Hemiplegia, occurring in persons under forty, in the absence of a cause for embolism, should arouse suspicion. Facial diplegia, unexplained paralysis of the facial and ocular muscles in adults, or Hutchison's triad of keratitis, deafness and notched or pegged incisor teeth in congenital syphilis, should be borne in mind. A patient came into my wards in St. Michael's Hospital a year ago, partially conscious and with paralysis of one side of the face. He had fallen in the street in a convulsion. An interesting fact in this case was that he had only been infected a few months previously, and some six weeks before entering the hospital he had received an injection of Salvarsan.

The relation of a previous syphilitic infection to some intense forms of anemia, often approaching the pernicious in type, is now generally recognized. It is not surprising that such cases respond extremely well to Salvarsan.

To the treatment of syphilis I shall only refer briefly. As with other infections, it is well to remember that the disease exhibits varying degrees of virulency, some cases being so light that there is possibly a natural tendency to a cure. Recent investigations all go to show that individualism is as necessary in the treatment of syphilis as in any other disease—perhaps more so. The treatment, to be effective, must be systematic, thorough, and the results controlled by carefully following the clinical course and by the Wassermann test. The importance of general care, good habits, hygiene of the mouth, etc., are so obvious as to require no emphasis.

In spite of the brilliant results already obtained by the use of arsено-benzol, mercury and to a lesser extent the iodides, still hold an important place in the therapy of syphilis. Many good authorities believe that the latter are still sufficient in many cases, and even the strongest advocates of Salvarsan, including Ehrlich himself and Wechselmann, advocate the use of mercury before and after a course of Salvarsan. Neisser, Fordyce and other authorities also recommend a similar procedure.

There is much difference of opinion as to the best preparation of mercury to use and the most efficient method in which to use it.