the light of later knowledge I am of the opinion that only recurring cases were worthy of that appellation. At that time I boldly resorted to all methods then in vogue, and freely referred my cases in consultation to those whom (from their writings) I believed to know most on the subject. Degeneracy, due to uric acid, and rheumatism were suggested, and as I found the rheumatic and gouty tendency in some patients having the disease, I inclined to accept them as a cause, if not the cause. But later, when the treatment did not effectually suppress the disease, I was satisfied there must be something else behind it all which should be learned. Reviewing the history of many of the most obstinate cases I found that in several I could trace syphilitic association. Believing much information might be gained I followed this trail and have continued so doing from that time. It was difficult to secure sufficient data, however, by which I could prove scientifically that which I suspected, for, as we all know, syphilis has so much insidious undermining effect, and patients are generally so unwilling to admit facts, that the study has many discouraging aspects. It is, however, my opinion that this disease does not alone show itself in those persons who have contracted it, but may also be found in the mother as well as her offspring. It was in these cases that I found locolosis or pyorrhea alveolaris to be so well defined that I felt encouragement; but obstacles arose which retarded my speedily reaching a definite conclusion. It was my hope at this time that I might gain something by turning these cases over to specialists in syphilis, gout and rheumatism for treatment, but the varied results led me to suspicion, and to be cautious in speech until I could get sufficient verified data to act more intelligently. In many cases I found that treatment had not been continued sufficiently to eradicate the specific poison, or the secondary effects thereof. In 1800 I had an opportunity to study blood, and then it was that I became convinced that the usual method of physiological study of this pabulum was inadequate. I now believe the blood carries with it the active principles of most, if not all, disease. Then the generally accepted plan for the examination of the blood was through dry and stained specimens. Even to-day that plan is largely followed. Could any but the most tenacious germs stand the baking process, which is claimed to be unavoidable? Not only are such specimens exposed to the oxidizing influence of the atmosphere but to heat which is of such a temperature that it is injurious to them. It might be said that only the survival of the fittest can furnish the possible opportunity of study, and then they can be recognized only after a course of staining that decor-ates them in "war paint," chief of their tribe. In Von Ziemenson's Practice of Medicine, Vol. III., page 40, we find that Kircher, in 1695, claimed disease to be due to living organisms, but it was not