

account of a case that occurred there in Dr. Wilkins' service in 1885. In 1889 O'Brien's case, the last Canadian case that had previously found its way into medical literature, was published.

It is evident, then, that human glanders in Canada was not in former years the rare disease that it is generally supposed to have been, and there is some evidence that even yet it is by no means very rare, for the writer has knowledge of at least four cases of glanders in man that have occurred in Canada during the last two or three years. Three of these were brought to his attention through the unfailing kindness of Dr. Rutherford, who set on foot among his inspectors inquiries which resulted in the discovery of these cases. The fourth case occurred a year ago at the Montreal General Hospital in the service of Dr. George E. Armstrong, and to Dr. Armstrong and the Medical Board of that Hospital I am indebted for permission to publish the case here. Dr. A. E. Vipond was also kind enough to give me his notes of a case that was probably glanders, but, as the case was somewhat atypical clinically and there was no definite history of previous contact with the disease, it has been thought best not to include this case here, though it presents points of unusual interest. It is likely that several cases of human glanders occur annually in Canada. Some of them are overlooked here, as they are in other parts of the world, owing to the relative rarity of the disease in man. It is no disgrace to the medical profession to admit that not improbably many Canadian human cases have gone unrecognized, seeing that expert bacteriologists with every modern means of investigation at their disposal have not infrequently experienced considerable difficulty in finding out the true nature of the disease. And from a clinical standpoint the difficulties in the way of making a definite diagnosis are often almost insuperable, particularly in the chronic form of the disease. Glanders is a disease the symptomatology of which is quite as varied as that of the other infective granulomata—tuberculosis, syphilis and leprosy. And the fact that not uncommonly the diseased man has not a single symptom in common with the horse from which he contracted the disease is apt to withdraw one's attention from what may be the only important clue to clinical diagnosis. To cite a concrete case, our own patient was ill for at least twenty months and, nevertheless, during all this period he did not manifest one symptom in common with his horses, some of which had been diseased for over three years before they were shot.

Limits of space forbid further discussion here. Those who are interested in the subject will find further details in the *Royal Victoria Hospital Studies*, Vol. II, No. 1. Chronic Glanders in Man. Enough, however, has been said to show that human glanders, though uncommon,