

of autopsies made annually, a fair number of instances of death during this stage, should not have been investigated, so that any marked departures from the normal in the condition of the organ, should by now have gained recognition. It is equally true, that there might be a certain amount of disturbance—the existence of miliary gummata or again a moderate extent of parenchymatous degeneration—which might easily escape detection, or be ascribed to other causes.

Some few cases are on record of extensive hepatic derangement during the secondary state. Thus, Hilton Fagge* reports the case of a female of 23 in whom there was a history of syphilitic rash with loss of hair and macular syphilides; jaundice supervened and the patient became drowsy and comatose. At the autopsy, the liver, which weighed 46 ounces, was of an opaque, bright yellow color and of dense consistence. The surface was mottled, the left lobe resembling very closely that of the infantile syphilitic liver;—on section, the organ appeared pale and semi-pellucid, and microscopically, the parenchyma was seen to be replaced by connective tissue. Unfortunately the description given does not extend to full details. But clearly here is a case of generalised cirrhotic change in secondary syphilis not unlike that found in the infantile disease.

There are on record some few other cases of like nature. To my regret during the last few months I have been away from laboratories and libraries, but in the course of an afternoon's search through the literature, I have come across quite a series of cases. One of the clearest examples is that recorded by Neumann,† in his admirable article upon syphilis, the case of a man of 20 years ill for about 8 months, who apparently was infected in June 1893 and in March 1898. a papular eruption was seen upon the external genitalia and mucosa of mouth together with slight icterus. The icterus increased and there was great abdominal pain, while ecchymoses appeared on various parts of the body. The liver diminished in size and 19 days later the patient died with uræmic appearances. The autopsy was performed by Kolisko who found a condition of catarrhal icterus with cholæmia together with the very interesting condition of "regeneration of the hepatic parenchyma in the form of adenomatous growths following upon acute atrophy. Kratz‡ records a similar case. Neumann quotes several cases of acute parenchymatous hepatitis in the secondary stage of the disease and holds it not improbable that there may be a relationship between the syphilis and acute atrophy of the organ.

Dittrich from a study of 46 cases has concluded that acute syphilitic hepatitis in general occurs during the secondary period. Engel-Rei-

* Hilton Fagge, *Trans. Path. Soc. London*, XVIII., 1867.

† Nothnagel's *Specielle Pathologie*, Vol. 23, p. 409.

‡ 66 *Versamml d. Naturfor und Ärtze.*, Vienna, 1894.