few formule in order to please the purely actuarial part of my audience, but I am pretty sure that the medical portion would not understand them, and I am very sure I could not explain them.

Suffice it to say that the following represents the best and latest findings on the subject, so far as we are to-night concerned —"When through disease, immunity is not attained; but, on the contrary, the parental tissues, as in progressive tuberculosis, become progressively weakened and susceptible to the deleterious action of the toxin, the germinal idioplasm may also be weakened, and an offspring be developed more susceptible to the particular infection." The point here is, that tuberculosis in a human being does not produce immunity. May I explain that by this is meant that an individual recovered from tuberculosis is not only liable to take the disease again (I speak in lay language) but is more liable than even before the first attack. This you all know is not true of many of the infectious diseases —measles, scarlet fever, smallpox, etc., in which the disease does produce immunity.

"An offspring may be developed more susceptible to the particular infection." The infection of which we speak to-night is the one in which we, as insurance men, are more interested than in any other. So to have so clear and definite pronouncement by one of the first of living pathologists, Professor Adami, Montreal, must give us pause when we come to adjudicate individual cases in which contracts are entered into involving the money of policyholders and shareholders alike.

It may be thought that I have taken too much pains to demonstrate what has been universally conceded—that tuberculosis is hereditary—that "the mountain has been in labor and brought forth a mouse." But let me repeat, there is a heresy taking strong hold upon the public, and to a greater or less extent upon a large section of the medical profession, that the hereditary factor in tuberculosis is of very little importance, if it exists at all. It is this swing of the pendulum which I would contradict. This fashion in a medical subject, which from its nature may be appreciated and taken hold of by the public at large, will work incalculable harm as well in social and family relations as in business relations. I have been in the habit of saying to my students at the clinic that what we inherit from our parents is not the germ of the disease, but a peculiar quality of tissue which is a good soil for the growth of the germ. Very many of us—indeed, I believe most of us in this room—have been at one time or another, and some of us many times, infected with tuberculosis, but the soil was not good—in more scientific language, the phagocytes were too strong for the tubercle bacillus, and general disease and infection did not result. It is surprising the number of cases of old cured tuberculosis we find in the post mortem room, the subject