

should be enjoined, the third year being devoted to the intermittent plan of therapeutics, or as some authors term it "intermittent treatment."

As soon as the existence of lues is established beyond doubt, no procrastination should be suffered, but specific medication immediately inaugurated. The initial sclerema, unless there be a concomitant mixed infection, need not give much apprehension and necessitates but little attention, except strict cleanliness and the application of innocuous antiseptic dusting powders, as bismuth subnitrate, boric acid and aristol in combination. A favorite formula with the author is the following:—

R/ Acidi borici dr. ʒ.....gm. 12. 0
 Bismuthi subnit. dr. ʒ.....gm. 12. 0
 Aristolis dr. ʒ.....gm. 8. 0

M. et. ft. pulv.

This should be applied twice a day after detesting the ulcer with hot water to which a small quantity of boric acid is added. Cauterization is absolutely contraindicated and should only be resorted to when the initial lesion is complicated by chancroidal infection and threatens to assume a serpiginous or phagedenic aspect. Cauterization will neither avert nor attenuate the already existing syphilitic toxin. In conjunction with the above, the organism should be brought under the influence of mercury without delay or dalliance, a course which should be persistently and rigorously adhered to for the subsequent 18 or 20 months with short periods of intermission or repose.

The author desires to acquaint the reader with a method of procedure which, for the lack of an adequate terminology, he has designated the "cyclic method"—and for which he implores indulgence and forgiveness. This method has been extensively used in dispensary as well as in private practice, and has been attended by the most favorable results; seldom, if ever, have any recurrences of the malady been observed. The treatment consists, broadly speaking, of the systematic administration of mercury in variable, changeable and alternate forms, with slight intermissions, wherein tonics and eliminatives are exhibited. This method possesses the following advantages over the old, ultra-empirical and crude form of routine:—

1. It never salivates the individual.
2. No untoward after effects are discernible.
3. Gastro-intestinal disturbances are obviated.
4. Consecutive mercurial dermatoses are not apt to appear.
5. Its greater efficacy, promptness and permanency.
6. It is more systematic and thorough.
7. The danger of recrudescence is minimized.
8. The tardive or tertiary phenomena are held in abeyance.