

blood and urinary secretion must be carefully tested in those obscure cases of cachexia often dependent on imperfect oxidation. The use of the microscope is becoming more general. And over and above all, we must be shrewd observers. The eye, the ear, the sense of touch, and the muscular sense carefully trained, furnish us with a knowledge of the objective in disease, as the subjective part belongs to the patient, and is not the physician's work. Every doctor must endeavor to be as far as possible a physician, surgeon, and accoucheur, full of general knowledge, for a specialist without this general knowledge is in no sense an educated man. In the science and practice of obstetrics as well, this general knowledge must be acquired for success. I have made this apparent digression to impress the fact that we must be students always in order to be doctors. Leaving the last paragraph, and resuming a former one, I would say that the antiseptic system has been carried to excess, not in surgery, but in midwifery. The accoucheurs of the past delivered large families into the world from their uterine incarceration at term, and how many mothers of these large families are still comparatively well, as old age approaches, and all without any antiseptics at childbirth. It is not fashionable to have large families now, and yet we have seen an increase of septicaemia with the decrease of the birth-rate. Is it meddling midwifery that introduces a poison from without, or is there some peculiar activity in our modern infective diseases that encourages the existence of blood-poison, even though these diseases are far removed from the streptococcus of septicaemia. Professor Lyman, of Chicago, in declaring that epidemics cannot be controlled by "mere sanitary rules" apart from home sanitation, says that the "suppression of small pox has been followed by increased mortality in scarlatina," and that "the suppression of scarlatina and measles has been followed by increased mortality in typhoid, diphtheria and diarrhoea." If this be true, diseases must change in character and intensity with social condition. Cleanliness is the *sine qua non* of health, and antiseptics is its modern form. In the article alluded to at the outset the learned editor of THE LANCET commends Professor Lusk, that eminent contributor to American obstetrical literature, for his crusade against modern midwifery. Dr. Lusk has made this noble statement worthy of a progressive teacher.

"I reserve to myself the privilege of changing my views to-morrow if it seems to me new observations should make a change necessary." A man cannot remain a conservative in medicine as he can in politics, but he must be of a deliberate turn of mind to preserve himself from continual experiment. Dr. Lusk, in accordance with modern authority, says that the acidity of the vaginal secretion is increased by natural micro-organisms, which antagonize the streptococcus of septicaemia. (I would just add here that the older writers taught that the streptococcus of erysipelas caused septicaemia in the puerperal woman.) This is a part of the protective wall that nature has erected, and is essentially a chemical defence. The other part is a mechanical barrier found in the accumulated mucus of the cervical canal, which is virtually an antiseptic pad. There is no doubt about the truth of this, for even in menstruation the glands of the cervical canal are very active in the secretion of