

vestigation of the seat of the primary lesion doubt was thrown upon the view that infection by milk was the great cause for the tuberculosis of early infancy. The detection of the primary lesion is in many cases difficult, and the result of the post mortem findings have to be read with some caution. In general we are guided by the fact that the lymphatic glands in childhood form a delicate index of the extent and duration of the tuberculous infection in the organs to which they correspond. Their condition is to be regarded as more important in the determination of the duration of the lesion than the condition of the organ itself, or the sequence of clinical symptoms.

One of the first to investigate the pathway of infection in children, was Northrup²¹ of New York, who, in 1891, in a paper read before the Academy of Medicine, presented the statistics of the New York Foundling Asylum, which emphasized the fact that in the great majority of cases of tuberculosis in children, the seat of primary infection was in the lymph nodes clustered about the bifurcation of the trachea, and the root of the lungs. In 125 autopsies on tubercular children, he found 88 cases of primary infection through the respiratory tract, 3 apparently of primary infection through the intestinal tract, and 34 in which the seat of the lesion was unable to be determined. He explains these last as cases in which the ravages were so extensive that the seat of primary infection was not clear; "the bronchial nodes were large and cheesy; likewise the mesenteric; the lungs contained tubercles, so did the liver, spleen, kidneys and meninges."

Holt,²² reporting in 1896 a series of 119 autopsies on tubercular children, stated that he found the intestines involved in forty cases and the mesenteric lymph nodes in 38 of these, but in his opinion primary infection of the alimentary tract was extremely rare. He adds:—"In the series of autopsies above given there was not one in which a careful study of the lesions made it at all probable that the seat of the primary infection was either in the stomach or intestines, while in 63 of the cases the intestines were not infected at all. In those cases where the stomach and intestines were the seat of tuberculous disease, with very few exceptions the disease was only slightly marked in that locality, although very advanced in the lungs and bronchial lymph nodes."

In 1899 Bovaird,²³ of New York, brought up to that date the records of the New York Foundling Asylum, giving the details of 75 additional post mortems to those previously reported by Northrup. In 60 of his cases the primary lesion was found either in the lungs or bronchial glands; in 8 the lesions of the bronchial and mesenteric