

infection, thus suggesting the possibility of successful anti-tubercular vaccination.

Syphilis.

Following upon the demonstration by Schaudinn of a spirillar organism or spirochæte in the lesions of syphilis, a great impetus has been given to the study of this disease in all parts of the world. The general result has been to confirm Schaudinn's work in all particulars, and at the present time the general consensus of opinion seems to be that we have in the *Sp. pallida* the specific organism of lues. It is true that here and there a dissentient voice has been raised, as one would expect and even desire. but the evidence in favour of Schaudinn's contention has not been seriously shaken. A great number of workers have confirmed the presence of the *Sp. pallida* in the lesions of primary and secondary syphilis and in the diseased organs of tertiary syphilis. The histology of syphilitic lesions has been worked over anew. The pathogenesis of the disease has to some extent been revealed. The communicability of the disease to certain species of apes has been amply proved. Finally, we are beginning to see our way to a more rational therapeutics on the analogy of other infectious diseases by means of vaccines and antiluetic sera.

Schaudinn's observations as to the constant occurrence of spirochætes in syphilis has been confirmed by Neisser, Buschke and Fischer, Ehrman, Schlimpert, Boitzke, Danziger, Lipschütz, Petzold, in Germany; Dudgeon, Richards and Hunt, Shennon, in England; Risso and Cipollina, in Italy, to mention by no means all. It seems to be fairly agreed that the spirochæta *pallida* presents distinctive peculiarities of its own and can be demonstrated with comparative ease in primary and secondary cases, and with more difficulty in the tertiary stage. For diagnostic purposes, scrapings may be taken from the primary sore, cutaneous papules and condylomata, and stained for the organism by appropriate methods. Material from enlarged glands may be removed by a syringe, or, again, smears may be made from the blood. In the last mentioned procedure examination should be very thorough, as the organisms appear to be scanty in the circulating blood. Most authorities point out that while a positive result is conclusive in favour of syphilitic infection, a negative finding by no means excludes the disease, owing to the comparative difficulty of discovering the spirochætes, which may be few and far between, to say nothing of the difficulty of staining them. In lesions other than those of syphilis the spirochæta *pallida* has not been found.