

them more liable to the occurrence of any disease) than are their more fortunate brethren in the higher walks of social life.

We are, therefore, I think impelled to the conclusion, notwithstanding the opinions of the eminent Dr. Murchison and his supporters, that to the rise of typhoid fever something more than ordinary decomposition is indispensable.

I need hardly say that the theory most commonly received now is that which was first favorably promulgated by Dr. VonGietl, on the continent, and which Dr. Buld has so strongly advocated in England, and which makes the fever-producing principle the existence of a specific poison, an organized germ,—a *contagium vivum*,—derived from a previous case of the disease introduced into the body multiplying itself indefinitely in its new position, producing symptoms of an exactly similar or slightly modified type to those of the primary disease, passing from the patient's body in the alvine discharges meeting with destruction, or more frequently finding a reception in some situation favorable to a continuance of its life and development. It is an unmistakable fact, that there are numberless instances upon record where the disease has been conveyed from the sick to others who were not under any of the unhealthy conditions to which the original patient might have been subjected previous to his illness, and which, therefore, could be accounted for on no other hypothesis than the existence of a specific poison. Dr. Austin Flint, in his "Practice of Medicine," lays particular stress upon the North Boston epidemic, as proving the contagious nature of the disease.

A traveller is ill. He stops at the tavern in North Boston, a small village of nine families, a few miles from Buffalo. His case proves to be a well marked one of typhoid fever, and he dies in a very few days. Up to that time no traces of the disease had ever been known in the village. The neighbours, all but one, who, being at variance with the rest of the village, remained within his own home, visited the sick man, and used the water from the tavern well, and it is a remarkable fact that all the families in the village were afflicted subsequently save Stearns, who had had no communication

with the others, and who used water from a well of his own. In forty-three of a population there was no less a percentage than ten deaths.

As Dr. Flint concludes, the laws of probabilities would not authorize the supposition that the peculiarity of the events depended upon a strange coincidence, and nothing more.

Trousseau narrates the circumstances of a number of outbreaks in different parts of France, which are not less strong proof of the existence of a contagium than that to which Dr. Flint gives prominence. Liebermeister, in his exhaustive article in Ziemssen's "Cyclopædia of Medicine," defines typhoid to be a miasmatic contagious disease, and after a lengthened discussion of the matter, concludes decidedly the poison of typhoid fever does not originate in decomposing substances but is a specific poison of itself; and in dealing with some of the objections made against the theory, he refers to some German village where decomposition, to no small extent, had been going on for ages, and yet no typhoid had occurred until the introduction of the specific poison. Nor do I think that any of us, even though our fields of opportunities have been of the most limited area, are unable to recall instances where the rise of the disease was explainable on no other ground than that which Liebermeister defends. Accepting then, as I think we must, that every case of typhoid has its origin in the poison from a previous case, there remains but a moment for us to consider the nature of that contagium, after which we shall be in a position to discuss particularly the epidemic so prevalent in this city.

That contagion is a living entity, I suppose is accepted as proven by the manner in which it conducts itself both outside and inside the persons of its victims. That it is discharged with the matters from the bowels, few will doubt, whilst some have contended that it is also discharged with the other excretions of the patient, an idea that seems to be open to very serious doubt.

That it multiplies itself has been clearly proven, a fact which as we shall see hereafter, is of great importance, and that finding its way into favourable situations, its existence may be