

2nd—That this virus may live and multiply in the blood and develop erysipelas at remote periods.

3rd—That the bichloride of mercury, taken internally, is a certain destroyer of the virus in the blood, and a reliable cure in cases of erysipelas of a recurrent character.

RHEUMATOID ARTHRITIS.

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The object of this paper is not to throw any new light upon the pathology, causation or treatment of this interesting malady, but to take a general survey of the disease, and to impress upon us those prominent features of the affection whose want of recognition has led to such terrible results. There are few symptoms we fail more often to recognize, notwithstanding that we observe them, than those of rheumatoid arthritis, and few affections whose want of early recognition is attended in its later stages with such helplessness and misery. Even in its advanced stages rheumatoid arthritis is often not recognized, the unfortunate victim of the disease being treated for gout, spinal curvature, rickets, or for tuberculosis of the joints. It is then the importance of the subject which has suggested this short paper upon the disease.

The affection is for the most part brought on by conditions which produce lowering of the vital powers such as overwork of body and mind, in adults prolonged grief and anxiety, circumstances provocative of catarrh, such as residence in low lying districts, in badly drained and ill-ventilated houses, and occupations involving exposure to cold and damp. Exposure to cold and dampness following fatigue is a powerful factor in producing the disease. In woman hyperlactation and menorrhagia are potent causes. Trau-

matism is responsible for some of the cases, more especially of the monoarthritic form. It is not unfrequently a sequel of acute articular rheumatism, and in some of the cases under my observation I was able to trace a strong history of rheumatism in the family. Persons of all ages may suffer, but those between 20 and 40 years of age are most prone to the disease. It is not, however, an uncommon affection in children. One of the severest cases I have met with occurred in a female child 10 years of age, a relative of my own, a case which presented every feature of the disease in its most typical form.

The pathology of the disease is obscure. There would appear to be a condition of chronic inflammatory changes affecting all the structures of the joints, bone, cartilage, synovial membrane and ligaments. The cartilages are more or less completely absorbed, the denuded bones are worn away presenting a condition of eburnation, bony growths form at the free margins of the cartilages and may extend to the capsules and tendons. Wasting and fatty degeneration of the muscles surrounding the joint also occur. Hydroarthrosis sometimes appears in the early stages due to effusion into the synovial sac. Small nodules form at the edges of the cartilaginous covering, producing the well-known nodosities of Haygarth and Heberden.

The exact nosological position of rheumatoid arthritis is far from being definitely settled. The opinions held with respect to it are:

(1) That it is a form of true rheumatism.

(2) That many of its manifestations appear to be dependent upon lesion of the spinal cord.

It is unfortunate that in a few cases the early stages of rheumatoid arthritis may be unattended with any subjective symptoms. In the large majority, however, the disease sets in with well-marked symptoms. The acute form