knowledge carries its own evidence with it. In this lies the great advantage of pathological research. Diseased organs with the signs and symptoms consequent thereon, have been studied closely during the last quarter of a century, with all the assistance chemistry and the microscope could give to the pathologist, nor have the observers labored in vain in this marvelous field of inquiry.

Let me give a few facts of recent date on this subject, in relation to cerebro-spinal pathology. Of course, they can only be a few out of the many daily coming into observation.

In 1840, Nasse discovered that after the division of a nerve, not only was the cicatrix after healing a different texture from that of the nerve divided, but that all the nerve from the cut part to its utmost extremity had changed in character. Atrophy, degenerated myeline, fibres changed in opacity and outline were always found to be the result of division in all the cut-off nerve. Ten years later, Waller not only corroborated this, but took a step farther and showed by actual experiment that not only did this change take place, but that regeneration to the normal condition never supervened. This was a great step towards a proper study of nerve decay, and especially of insanity in relation to permanent recuperation. A breach of continuity once effected in nerve tissue, either by disease or traumatic lesion, means irreparable loss of natural structure, and as a consequence loss in some degree of normal tone and function. We know that inflammation never leaves a structure as it found it. The interosseous substance of a fracture is always different from the normal bone. A scar is a good example of change of structure, and which always remains in this condition. In the same way, so distinct

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