OBSERVATIONS ON ANTISEPTIC THERAPY.

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In the June number of THE CANADA LANCET, there appeared an excellent editorial on the "Nature of Puerperal Fever."

Now, I think the word nature is a most apt and well-chosen word, and the best in its list of synonyms, as every one understands its primary meaning, and I infer that it has this signification in the article to which I allude. The expression puerperal fever is not so suggestive or definite as we would like, but it is the old familiar term which our conservatism delights to retain. It is the name of an associated symptom or condition in the same sense that glycosuria is—a sort of metonymy, by which a certain effect is put for the cause which lies deeper. The uric acid diathesis comprehending apparently a wide class, is attracting much attention now, and the aim of medical science is to proceed by induction, as the logicians would say. General principles and causes are aimed at, while symptoms are only the data or evidence for the investigation of cause. We have passed the Augustan age of etiology, and are now in its Victorian epoch—a brilliant period, and already we hear of twentieth century practice.

Chemistry and the microscope promise much in medicine. Listerism, by which I mean the whole field of antiseptic application, with its consequent approach to aseptic conditions, has made operative surgery a greater success than ever, and if it is not all that its advocates claim, it is cleanliness anyway, and any attempt to displace it would be a step toward the "dark ages" of practice. Let us approach the sanctuary of

antisepsis with all reverence.

Whether its concomitant outgrowth, the destruction of one poison by the antagonism of another, will become a part of the medical creed remains to be seen, but it is just possible that the chemistry of nature works in this way. Non-pathogenic organisms may accomplish the destruction of the pathogenic in order that the vital functions may be preserved intact. Physiology is the antagonist of pathology, for nature always resists the invasion of its functions. Both acid and alkaline secretions are essential for the vital processes, and we know clinically the effect on nutrition when there is any substitution or exchange of reaction. Litmus paper has its place in therapy, and the microscopic side is a supplement to the macroscopic. Qualitative analysis is only a part, quantitative completes the whole. Esbachs' method of estimating albumin is a step further than the nitric acid test for its presence. Diagnosis does not stop at symptoms, nor does it reason by analogy, but it recommends that every case be studied on its own merits after those symptoms have been noted. This is the index to successful treatment. It is doubtful whether there is any such thing as a functional disease. Either qualitative or quantitative changes may effect the secretions, and so cause disease. We must have more chemistry in clinics, and all our investigations must be as exact as possible, for the exact sciences demand exact methods.