

losis, and Hueppe also pointed out a distinct *morphological difference* in the two *micro-organisms*.

At this stage of our endeavours, it may not be unproductive to survey the groundwork of argument over, briefly to ascertain exactly where we are as far as this important subject is concerned. When the bacillus was discovered, the infectious character of the disease almost universally centered on Koch. The Grand Duke of Tuscany, in 1754, issued an edict relative to its infectious character, and in various parts of Europe, particularly Naples, Lucca, Venice, Bologna and Rome, attention was directed years ago to this particularity of the disease. It is somewhat remarkable how the infectious nature of tuberculosis, through time, was in a great measure lost sight of, and grasped subsequently, almost anew, on the discovery of Koch. A question before us, and one which will doubtless be carefully considered in the aetiology of tuberculosis, in the tubercle bacillus, the *chief factor in its production*. It is a known fact that individuals are immune to certain doses of the tubercle bacillus, and does the present state of our knowledge warrant us in requiring the absolute isolation of phthysical patients? What we do require is better accommodation for the treatment of the poor; less of the sweating manufacturing process; increased vital capacity of air in underground or overground compartments, where operatives are almost huddled together. In addition, the result of excessive strain of brain and general nerve tissue in our present system of education; the food problem and scrap diet in school or college life; the excessive use of alcohol, and defective sanitary arrangements; all of which, misdirected, have an undoubted tendency to lower the vital powers of the system, and become potent factors towards the development of tuberculosis. As to the actual life history of the veritable microbe, we owe much to a French Canadian, Dr. E. L. Trudeau, of Saranac Laboratory. In 1886 were published a series of experiments, demonstrating the infectiousness of bacillary sputum, and the harmlessness of expectoration free from bacilli, taken from a patient supposed to have consumption. He recently pointed out the possibility of infection of the hands of consumptives, and demonstrated the presence of living bacilli on the hands of patients using handkerchiefs, and their absence generally from sanitorian patients who made use of the proper cuspidors; also noted most carefully that inoculated rabbits, allowed to run wild on an island, recovered, whilst those subjected to unhealthy conditions died within a short time. These are practical points of great moment, and indicate the importance of the open air treatment of this disease so generally adopted at the present time, which actually required no