

accompany the sometimes considerable elevation of temperature of the body. In short, no appreciable anatomical lesions whatever could account for the fever which therefore was declared to be *essential*. Such were : scarlet fever, measles, variola, enteric fever, and at last, puerperal fever. The morbid phenomena which characterized these diseases were consigned to a special corner of the nosological frame and constituted a group to which were applied the denominations of infectious, virulent, zymotic affections. The etymology of these various names very well showed the tendency towards the right direction, and the terms virus, infection, ferments, seemed to foreshadow, as it were, the dawn of the greatest discovery of this century. Still the vagueness of those purely hypothetical conceptions brought but little satisfaction to the numerous observers deeply absorbed by the anatomical researches and who had at their disposal, means of investigations improving more and more every day. These indefatigable workers, digging with utmost eagerness the pathological tissues down to the last fibres, were incessantly in hope of finding in the ultimate revelations of post-mortem examinations the anatomical explanation of morbid phenomena, the etiology of which had escaped their predecessors. It is especially on the ground of puerperal fever that the conflict assumed the most gigantic proportions. Two opposed camps were in presence, and the combatants on either side made, at that time, the halls of scientific societies resound with the expression of their respective opinions. On one side puerperal fever was considered as a morbid entity, a disease "*sui generis*," produced by an invisible agent of an unknown nature, giving rise to manifestations, the explanation of which could not be found at the post mortem-examination of the organs whose integrity would generally seem perfect. Those who fostered that opinion were called *Essentialists*. The others refused to accept the essentiality of puerperal fever. To them, there existed, after labour, a wound in the uterus. This wound, like any other traumatic lesion, remained exposed to inflammatory complications which would spread by continuity or contiguity of tissues up to the abdominal cavity, or end in the formation of pus which, absorbed by the blood-vessels or the lymphatics, would cause disorders in parts more or less remote from the initial point. And, they would add, if other observers had not found the presence of material lesions at the autopsy, it is because they did not know how to look for them, for they existed in every case and would account for the clinical manifestations offered during life. The latter were called "*Anatomists*," and what a masterly description have they not left us of the course and symptoms of puerperal fever ! They acknowledged three prin-