

best interests of our patients to a foolish determination to maintain a reputation for consistency. But we have not done so. We profess to give to the sufferers medical advice, and this medical advice is based upon the teachings of medical science.

The change to be explained has occurred within the last twenty-five or thirty years. It may be that I am somewhat influenced in the selection of this epoch, by the fact that it covers the whole period during which I have been in relation with the healing art. But I am sure that in 1837, when I began my medical studies in Europe, there was just begun a change which in ten or fifteen years had reached nearly all the leaders of our profession, and, indeed, the mass of intelligent practitioners. At that time the bleeders were in the majority among the eminent men, but they were beginning to hesitate in the free use of the lancet on many occasions. No one ventured to denounce phlebotomy, but there was a certain reserve in the expenditure of blood. Men began to talk about *spoliative* bleedings and the dangers connected with anæmic convalescence. The value of energetic innervation was acknowledged, and its dependence upon arterial blood of good quality was felt as it had not been felt before. Broussais had called typhoid fever, gastro-enteritis, and had prescribed general and local bleeding; but the public had lost faith in Broussais and his teachings. The Pathological-Anatomy School called the same disease dothimenteritis, and prescribed bleeding in moderation. But at that very time there were men, even among the clinical professors of the School of Medicine, who ventured the opinion that the proper name was not to be taken from a single symptom; that there was a preliminary disease long before the eruption on the skin or the enlargement of Peyer's glands could be observed, and that it was well to return to the name typhoid fever, and to look at the totality of the symptoms and no longer at one or two, exclusively. And these same men practised in the hospitals and among their own patients the expectant treatment, giving little or no medicine, supporting the strength by nutritious but liquid food, and attributing to this expectant treatment a success far above that obtained by the antiphlogistic plan. Fouquier gave a bottle of seidlitz water every other day, and seldom prescribed anything else.

For several years matters remained thus in suspense, the anatomists observing the intestinal lesions, and the more thoughtful men meditating on the great loss of strength, the eruption, the limited duration of the disease and its contagion. Thus meditating, they felt that the disease was not the eruption upon the skin, nor yet the intestinal disorder, but something earlier, more general, nay, well nigh universal in its influence. Soon after this came the discovery that, in inflammation, the proportion