

symptoms to the non-indurated phagedenic chancre. Specific induration is the certain, absolute proof that constitutional infection has taken place. As a consequence ganglionic engorgement supervenes. As a general rule, more than one gland is affected; the swellings are *multiple*, distinct, hard to the touch, very indolent, and terminate ultimately in slow revolutions. Suppuration is rare, and can be traced to some foreign cause. Indurated chancre being determined in conjunction with multiple bubo, M. R. lays down the following law, which can ably be evaded by specific treatment, that six months will not pass without the manifestations of syphilitic diathesis. Even previous to this period there are indications of constitutional disorder, as chloro-lenamia, feebleness, alopecia, neuralgic pains of the head, intermittent nocturnal pains of the extremities, intensified by heat. The lymphatic glands, especially in the posterior cervical and cephalic regions, become engorged, and form what M. R. calls *secondary buboes*. They are indolent, multiple, seldom or never suppurate. The first cutaneous manifestations are exanthems, to which succeed papulæ, squamæ, &c. The same affections invade the mucous membrane, but their progress is somewhat more rapid. After the first six months, rarely before, accidents, called tertiary, of a much more serious nature, follow. Such are affections of the subcutaneous, submucous, fibrous, and osseous tissues, and of certain organs, as the testicles, lungs, liver, &c. M. R. is inclined to think that after the tertiary symptoms the specific influence of the morbid diathesis on the body gradually diminishes, and ultimately becomes one of the most powerful causes of scrofula.

Mention is here made of the indurated chancre alone, and of its fatal effects upon the constitution. What testimony is there in reference to the non-indurated chancre and its varieties? That they are essentially local affections, never producing constitutional symptoms, unless under the supervision of indurated chancre, and only giving rise to lymphangitis and buboes, which are of two distinct varieties; 1. The lymphathetic or simple inflammatory, which is generally confined to one ganglion, yields readily to antiphlogistics, and rarely suppurates, and when it does, it does not yield inoculable pus; 2. The bubo *d'absorption*, which is common, generally confined to one gland, which is always superficial, and always tends to suppuration, the pus yielded being inoculable, and, therefore, contagious. These buboes *d'absorption* are nothing less than ganglionic chancres.

It is the firm conviction that chancre is always at the commencement a local affection, and that sooner or later it will determine, though not fatally, to accidents either of a simple inflammatory kind, or of a specific nature, that M. R. so strongly advocates the ectrotic or abortive method