

The importance of the reply you will make to such a question cannot be over-rated. If you interdict marriage to a man in a fit condition to marry, your medical sentence may destroy his happiness and his subsequent career. If you authorize the marriage of a man still suffering from syphilis, you expose not only the individual himself, but also his young wife, to whom he brings the disease as a wedding present, and again the entire family which may result from the union.

I have witnessed too often these sad dramas of family life, and I can affirm to you that nothing can be more execrable than the situation of such a man before a wife who weeps, but forgives; before her family, who do not forgive; and before a nurse infected by the child, who recriminates, gives rise to scandal, and divulges the secret. We will, then, seek to resolve this terrible problem regarding syphilis in the marriage relations. And, primarily, an important question presents itself for consideration.

Does syphilis constitute an absolute obstacle to marriage? "A man who has the syphilis should remain a bachelor;" this is what you will very often hear. I could cite two very honorable practitioners of my acquaintance who have renounced marriage on this account. One of the two, who enjoys a high reputation, has never allowed himself to be persuaded by me, and always replies: "When a person has syphilis, he should keep it for himself alone."

To this I reply: when one has the syphilis it should be cured, and then marriage and a family may be thought of.

Syphilis is not an insurmountable obstacle to, nor an absolute interdiction of, marriage; daily observation shows cases where such marriages have been contracted with safety: we meet every day with married men whom we have seen suffering from syphilitic lesions, and who have transmitted absolutely nothing to their wives, and have children as healthy and flourishing as they can desire.

I have been able to find fifty-one published cases besides those I have observed in my own practice. These fifty-one syphilitic fathers had ninety-two children, all free from the disease. I recall one such case where there were four children and another where five children were born. I have been physician of both families for many years, and have never observed a trace of syphilis in the children. I conclude, then, by asserting, with a conviction fortified by observation, a man may enter the married state after having contracted syphilis; but he should marry only under certain conditions.

A young girl espouses a man presenting syphilitic lesions; after being married a few months a physician is called to the young wife, who presents strange and uncommon symptoms; syphilitic eruptions are found, mucous patches about the mouth, glandular enlargements, falling of the hair (alopecia), etc. If the physician seeks for the origin

of these lesions, he is unable to find any trace of initial chancre, or of a bubo, faithful companion of the chancre; secondary lesions alone are found without any trace of primary lesion; on the other hand, if the husband is questioned in secret, he will affirm and protest energetically, that he has never had any venereal disease, that he has always carefully examined himself after intercourse, etc.

He is right; in effect his wife may become syphilitic through contact with this man who exteriorly appears not to suffer from the disease; this apparently paradoxical fact has been too frequently observed to place its occurrence for one instant in doubt. This mysterious contagion is explained by the fact that the woman is with child. Always, in such cases, you will find that the woman has borne a child or had a miscarriage a short time previously. The mother has, in fact, been infected by the child and not by the father. Contagion has taken place through the placental exchange going on between mother and child; a fact absolutely proven to-day. I hold it as a constant fact that a syphilitic father is dangerous for his children.

But I admit that the possibility of transmission is much less certain than has been generally supposed when the father alone is affected, the mother remaining free from the disease.

Paternal influence may be rare and restricted, but it is sometimes exercised.

Syphilitic fathers have procreated syphilitic children, the mother remaining free from infection. Ricord, Trousseau, Diday, Liégeois, have all given incontestable cases. But this is but a part of the question, which assumes gravity from the following considerations: The death of the fœtus in utero is very frequent under the conditions of which we speak. The child of a syphilitic father dies in the womb of its mother and is expelled by miscarriage or by premature labor.

A young wife becoming enceinte has one, two, three miscarriages, without it being possible to find any other cause except the syphilis of the father.

And what proves this to be the real cause? If the father places himself under a course of treatment, the following pregnancies proceed to full term and the children are born alive, without the disease.

I have observed such cases very many times. I will cite one case among many others: One day I met a former companion. His wife, though of fine constitution and very strong, had miscarried four times in succession. I then recalled to mind that my friend had suffered, long before, from syphilis, and had not followed any regular course of treatment. I, therefore, advised him to place himself under a course of treatment for his syphilitic affection, which I did not consider cured.

My counsel was rigorously followed, and fifteen months later I learned of the birth of a fine child, who is ten years of age to-day, and enjoys excel-