

So some of the negative proofs against my patients disappear. The improbability of second-generation transmission has always been to me anything but clear. It is, and always has been, difficult for me to comprehend why any diathesis of less virulence should be transmissible through several generations, and that syphilis alone, the severest of all systemic blood diseases known to us, should be unlikely to affect the second and be impossible to affect the third. We take gout, and find it skips one and sometimes two generations, and appears in the third or fourth, but syphilis never! No; I cannot accept this matter as settled with the evidence of these cases before us.

Again I quote Jonathan Hutchinson, "Woods' Monographs," page 351: "Five, ten, twenty, and even five-and-thirty years without any further indication of its taint, and then may occur some definite and most peculiar affections." It seems to me that so long as this disease is lying dormant but still exists in the parent, any offspring is likely to be affected with the disease to a greater or less degree. It may also lie dormant in that offspring until some opportune time when a condition of the system may arise that is favorable to its development, when it will assert itself in no uncertain way.

I believe in my patient's case that pregnancy was the systemic crisis at which the latent syphilis became active. There is no doubt that contagiousness ceases in a limited time; but does heredity ever cease?

The literature on the subject is scarce. Dr. J. E. Atkinson reports a case in "Archives of Dermatology," 1876, at considerable length, but in a conversation with him in 1888 he said that, in the light of subsequent events, he was not so positive of the hereditary transmission. Dr. E. L. Keyes, on page 73, "Venereal Diseases," says that he has a case under observation, but in a letter he says that the evidence is not clear in the case.

In the case I have quoted from Paul and E. Diday the discussion was entered into by Diday, Rollet, and Rodit, and the long time—six years—before roseola and mucous patches developed showed that a possibility of subsequent infection from some source was present and made a decided uncertainty in the case.

Dr. Keyes, on the same page, (73), "Vener-

eal Diseases," says: "The reason syphilis is not generally transmitted to the third generation is that if the quantity of poison in the child is great and the quality intense the baby does not survive. If it is less powerful, the child overcomes it, throws it off, or at least gets so far in the tertiary stage before it has reached the age at which it can marry and have children, that transmission to the third generation is very seldom encountered."

Jonathan Hutchinson says, in his remarks on "Hereditary Transmission," Reynolds' "System," edition of 1880, page 431: "I have repeatedly seen cases, patients of various ages between twenty and twenty-eight, subjects of syphilitic keratitis for the first time. We might conjecture that such persons would be likely to transmit to their offspring some degree of taint, seeing that the taint is in full activity in their own bodies. About eight cases have come under my own observation in which persons, undoubtedly the subjects of inherited disease, have become parents. With one exception, I have never been able to discover any evidence of disease in the offspring. In several instances the offspring appeared to be in excellent health." The one exception, though, illustrates the possibility of transmission.

J. Nevins Hyde, in the article on "Syphilis," "Reference Hand-book, Medical Sciences," vol. vi., page 701, says: "A few exceptions are reported to this law—so few, so inconclusive, as to rather more establish its general applicability." I cannot find the article quoting these exceptions.

Behrend, in the "Berliner klinischer Wochenschrift," 1881, Nos. 8 and 9, pages 107-124, says that all facts go to prove that the so-called law of Colles is not worthy of the name of law. But when answering a vigorous article by P. Diday and A. Dogon, which appeared in "Annal. de dermatologie et de syphilis," Paris, 1883, iv., page 79, which defended Colles's law as well established, he said: "The exceptions to the Colles's law are much more important than the law itself—a law which only merits oblivion. Its exceptions alone should be taken into consideration, as they alone fairly merit the name of law."

The conclusions I would draw from the above quoted case are: