The steady but irresistable advance of Preventive Medicine to the crowding back into the rear of the old time curative process with its numberless failures is slow yet sure. "All wholesome change is gradual; creeping from point to point; yet he knows best and does best who best forsees," says Dr. Allbutt. The following are some extracts from his admirable address: If our quinine should, figuratively speaking, be poured out upon our marshes rather than upon such marsh poison as may have entered a human body; if our therapeutic proteids are to be elaborated as defensive vaccines rather than as cures for disease, or if in any case they combat not the disease but the injurious agent, whether within or without the body; . . . if some renal and some hepatic diseases are due to external causes; if cancer turn out to be a parasite or in any case to be inexpungable, and so forth,—then where is curative medicine to be found?

Even in the treatment of liseases still regarded as autogenetic, is there not a division into means of prevention and means of cure? Consider that if in gout we have a human body so constructed as to be an acid-making machine of a particular kind and that we admit the great virtues of curative treatment in such a body—the virtues, say, of blue pill or colchicum, do we not admit, valuable as are these curative agents, that yet they hold a subordinate place to regular exercise and air, diet, place of residence, the use of mineral waters, and so forth, which come under the head of preventive medicine? . . . In so far as it be true that the disease of which granular kidney is a main feature owes its origin in many cases to this gouty habit, we shall grant that the only direction in which we can look with much hope for an escape is in the direction of preventive medicine. Curative medicine may triumph in an attack; but prevention will be our plan of campaign, and will lead to far wider and more permanent results.

We have a long and direful list of nervous diseases from the highest centres to the lowest, from cell to fibre, from patch to patch, for which we have neither means of prevention nor means of cure, and for these, as a matter of habit, we exhibit certain fashionable formulæ of belladonna, silver, phosphorus, zinc, strychnia, &c., on the principle of exhibiting rosemary to the devil; we administer the actual drugs hour by hour, but it would be simpler and safer to sew up the prescription in a bag and let the sufferer hang it about his neck. Yet knowing as I do the eminent importance of stimulating the hopes and animal spirits of the patient, I shrink from dissuading you from the use of these useful "survivals" until we have some better means to offer, or until the scepticism of the public grows too strong for us.

Turn to pulmonary disease. Without forgetting the occasional aid of emetics, and even bloodletting, at critical moments in acute general bronchitis, which are no novelty: when, on the other hand, we regard the row of dusty bottles and boxes containing endless balsams, expectorants, emollients, and other trash now half forgotten or handed over to herbalists; when we remember how exclusively our attention is given to minute regulation of the patient's atmosphere, clothing, and other external conditions, with due recognition of the necessary course of the three stages of the malady, we shall realise how far preventive medicine has here penetrated. A person subject to recurrent bronchitis must be treated almost wholly on preventive methods, and drugs almost as wholly excluded. Of the drugs I have seen administered in acute pneumonia, I can recall many most injurious, many which retarded crisis and convalescence, none which were of use. In all these cases, of course, I speak of medicines directed against the disease itself, not of those properly and effectively used against some inconvenient or dangerous incident, such as hyperpyrexia or delirious insomnia, which depends upon an idiosyncrasy or special circumstance of the case. Where, again, are the hundred-and-one boasted remiedies