

SYPHILIS AND THE LIVER.*

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Without doubt the most important fact elucidated by a study of the hepatic lesions of Syphilis is that, from an anatomical and histological point of view, no distinction can be drawn between secondary and tertiary syphilis.

Clinically I admit that such a distinction is useful, nor do I wish it to be thought for a moment that I imagine it can be done away with, although even clinically—as seen in connection with the syphilodermiæ—the establishment of a hard and fast demarcation between what is secondary and what tertiary leads not infrequently to confusion. The most that can be laid down is that when syphilis is acquired in the ordinary way, by sexual intercourse, the extension of the disease in general follows a definite course, the tissues tending to be affected in definite order. Or perhaps it is more correct to say that in syphilis as in other zymotic diseases—I use the term zymotic in its strict sense—there is a local or tissue predisposition, so that certain tissues are apt to be more extensively and more markedly affected than others, the virus multiplying more readily, so that in them as a consequence, there is an earlier and more pronounced reaction.

But while this is the case, the reaction in a given tissue is of like order, be the period of local infection early or late: at most there may be histological differences caused by variation in the interaction between virus and tissue. If the virus be strong or the tissue be possessed of feeble reactive powers, the histological appearances differ to a greater or less extent from what is seen when the virus is weak or the tissue possesses originally or has acquired strong reactive power. And as a corollary to this, it may be said that where the virus is powerful and there is rapid proliferation there, in such diseases as syphilis and tuberculosis, the course of the disease is modified so that we have to deal not solely or not in the main with the local disturbances caused by focal growth of the virus, but see well marked other anatomical changes brought about by diffusion of the toxins. In other words, where the tissues are susceptible and the virus relatively powerful there may be generalised tissue disturbances apart from the granulomatous developments directly caused by the focal proliferation of the germs. For at the start, it must be laid

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