

SYPHILIS.

On this much debated subject new facts are from time to time coming to light. One of the new teachings is that the spirochaeta pallida is not the real cause of the disease, and its destruction does not effect a cure. The reason for this view is that this form of the infecting organism is only the male generative element. The real infecting agent is a spore and that spirochaeta is only one phase of the life history of the organism. It is the destruction of this spore that is necessary to effect a cure. If it will be shown in the future that there is a true stage of sporing the treatment and prognosis must be based upon this knowledge.

Too high praise cannot be spoken of the nurses from the United States who went to the relief of the disease-stricken Serbians. The difficulties they had to encounter, the trials they had to endure, the dangers they had to face, and the awful sights they had to witness, were such as would try the bravest of the brave. But they faced the ordeal all for the love of humanity, and they won out.

Another fact that has been well established by ample experience is that the disease directly curable in proportion to the early stage at treatment is commenced. It is very doubtful if a perfect cure can be obtained when the disease has made considerable headway, and has become generalized. This experience lends force to the argument in favor of the view that there is a sporing process in the life of the organism.

When we come to the question of the treatment of the disease, it is becoming more and more evident that the only absolutely trustworthy remedy for the final cure of the disease is mercury in some form. The arsenical preparations, under names, such as salvarsan and neo-salvarsan, and some others, do not effect a radical ridence of the organism from the body. While these remedies are very valuable as aids in many phases of the disease, they must be supplemented by mercurials if the best results are to be obtained. We are inclined to think that if full trust is placed in salvarsan or neo-salvarsan to the exclusion of mercury, positive harm well result, and relapses and late sequels prove increasingly frequent.

Another fact that has been worked out by much observation is that the Wassermann reaction must no longer be regarded as evidence of active infection. The reaction may be quite positive long after infection has ceased to be present. It is, therefore, not a reliable guide for the administration of treatment. It is of far more value as a corroboration of diagnosis. It would be incorrect to say that a positive reaction calls for salvarsan, or its continuance until the reaction is negative.