

philis, through the infecting medium of secondary accidents, as mucous papulæ, tuberculæ, &c. It is well known that chancre, during the period of reparation, frequently assumes the aspect and characters of mucous papulæ; and in no small number of instances it is extremely difficult to make a differential diagnosis. It often thus becomes an important point to decide between primary sores and secondary accidents, particularly when touching the contagion of the latter. The evidence given in regard to the transmissibility of secondary diseases from nurse to the nursed, and *vice versa*, is very imperfect and wanting in essential proof. For this reason, among other facts, tending strongly to the contrary conviction, Hunter denied to secondary accidents the power of communication, and M. Ricord partakes in this opinion.

The primitive ulcers or chancres are of different kinds. There are four well-marked species—the simple, the inflammatory, with tendency to acute gangrene, phagedenic, and the indurated. Let us here follow out a lecture given at the bedside, illustrating different points of doctrine regarding chancre, especially the indurated variety and its consequences. It is comparatively a small number of chancres that indurate, and it might be asked, What is the cause or necessary condition of induration? It is found in certain persons that a first chancre, for example, will not indurate; the second does, and those subsequent do not. It is conceived that, as small pox, once taken, gives immunity from subsequent attacks, and as vaccination preserves against a second inoculation, at least for a certain period, when the system seems to be under its modifying influence, so in syphilis, as a general rule, a person who has once had an indurated chancre will not have another. There are probably exceptions; *i.e.*, a second indurated chancre may occur, which would intimate the destruction of the syphilitic diathesis, acquired with the first!

At what period does this variety of primitive ulcer commence? The solution of this question is important; for the moment induration takes place, the disease is no more local, the syphilitic disposition is established, in virtue of which the subsequent manifestations present themselves. In most cases this is difficult; for it is often next to impossible to trace out the time and circumstances of the contagion, and being essentially *indolent*, it frequently passes for a long time unperceived, and previous to the patients presenting themselves. M. R. is able, however, to gather that induration never occurs before the third day. It is always manifested during the course of the first and second week. It appears even certain that if a chancre exists more than three weeks, without induration, it will not indurate! It is sometimes masked by common inflammation, which may lead to a wrong diagnosis, or it may become phagedenic, when one would be apt to attribute the constitutional