

covered with much adipose tissue, and in certain scrofulous conditions which I shall refer to later.

Papular eruptions occasionally indurate on the penis, and if irritated or neglected sometimes ulcerate, thus bearing a strong resemblance to a true chancre. Tough, indurated cicatrices are not uncommon at the entrance of the vagina in uncleanly prostitutes, and when inflamed by filth and inattention imitate the initial manifestation of syphilis very accurately (Hill).

Fibroid gummy deposits, under certain circumstances, put on a very similar appearance to the venereal ulcer.

It is a matter of the greatest difficulty to determine the nature of ulcerations occurring in the female, and often it is only by symptoms external to them that their character can be recognized. Such is the rapidity of the evolution of chancres on the mucous membrane in women, and the difficulty of exploration that we obtain little or no result from the most minute examination (Cullerier). It is likewise no easy task to judge of the character of a concealed chancre—urethral and phimotic—particularly if the history is obscure or especial characteristics lacking. Ulceration, phagedenic or otherwise, may completely mask the induration of a sore, and accidental inflammation may altogether alter in character an accompanying specific adenitis.

Chafings, abrasions and herpetic eruptions give rise to very annoying doubts sometimes, and this arises in great measure from the vicious habit, not alone confined to the laity, of touching every suspicious point with caustic. If untouched in the beginning, these insignificant lesions heal in a few days under the most simple dressing; but the slightest cauterization, especially of herpetic vesicles, I have seen occasion most obstinate and persistent ulcerations, and when thus disguised by officious and useless interference, their real origin remains a question of uncertainty for weeks.

The ever present danger of the syphilitic virus gaining admission through an abrasion should never be forgotten, and it is a duty

which the physician owes to his own reputation to inform his patient, when consulted on that account, of the possibility of such a danger. Under such circumstances, the natural inquiry is as to how long before local symptoms of infection will show themselves. The limits of safety in this respect are very hard to establish, and it is more prudent to defer it to a longer than a shorter period. As remarked before, the incubation stage may be a great deal more or a great deal less than the average. Martin reports the case of a girl confined in the St. Lazare prison, where the period of incubation was seventy-two days; M. Fournier one with an incubation of seventy days; Bumstead one of fifty days.

Then again it must be remembered that in some instances the local expression of infection is so slight as to be practically worthless for diagnosis, and after all we are obliged to wait through the period of second incubation before any opinion can be given.

The only condition of the lymphatic glands at all similar to specific induration with which I am acquainted, is to be found in scrofulous subjects. If an ulcer consequent upon exposure should be coincident with scrofulous engorgement of the ganglia much confusion would be the result, if a clear history were not obtainable. Epithelial growth on the glans penis or vulva, where they are rare, are frequently taken for chancres, and chancres on the lips, where epithelial growths are so often seen, are not infrequently mistaken for that form of cancer.

I am aware that I have given but an imperfect account of the various lesions that go to make up the perplexities of diagnosis and prognosis in venereal practice, but I believe that I have enumerated the more important ones. In this paper I have particularly concerned myself with the exceptions to the general rules—those cases in which, owing to many circumstances, no absolute and immediate opinion can be adventured upon; and I think that I have shown that the exceptions are sufficiently numerous to justify the greatest caution in prognosis, even at the hands of the most experienced observers.—*St. Louis Clinical Record.*