those animals in which non-tubercular matter was employed no true tubercular lesion resulted. Experiments made upon dogs, causing a certain number to inhale phthisical sputa, while others inhaled non-tubercular matter, gave results similar to those obtained in the case of the guineapigs.

It would be impossible and also unnecessary in a paper like the present, to give anything like a minute description of those careful and delicate experiments by which Koch was enabled to demonstrate the bacilli of tubercle, suffice it to say, that they appear to point most conclusively to these micro-organisms as the true exciting cause of this formidable disease. The weight and intrinsic value of these experiments have not I believe been in any way shaken by the different attacks made upon them.

Dr. H. D. Schmidt's view, that these bacilli are nothing more than fat-crystals has been fully negatived by different observers, among others by Dr. Hirschfelder, of San Francisco.

If by this discovery we are given any practical indications for the successful treatment of phthisis; if by it we are enabled to save a single sufferer from certain death, then these experiments have not been in vain; and that these indications are given appears indisputable; that they will daily become more valuable seems also probable, as our methods of treatment become increased and improved, based upon a knowledge of the true etiology of the disease.

In concluding this paper, which has I fear far exceeded the limits of your patience, I must express the hope that the main object which it had in view has been accomplished, namely, the conclusive demonstration of the intimate relation which exists between experimental observation and practical medicine.

There are 10,500 insane looked up in the State of New York.

NOTES OF A CLINICAL DEMONSTRA-TION OF DISEASES OF THE SKIN.

(Given at the Montreal Dispensary,)

BY R. L. MACDONNELL, M.D.,

(During the Summer Session of McGill University, 1882).

I have brought together for your benefit some six or eight cases of skin disease, which have been under treatment lately in this institution. We shall examine them together:

Acne.—Here is a young man, tall and apparently strong, who has been a patient here for some weeks. On the side of his nose and about his forehead you see several elevated pustules, which have been appearing ever since he began taking the bottle which he has brought to-day to get filled. He is an epileptic, and you will no doubt recognize the condition of his face as that of acne artificialis. Bromide of potash tends to produce, in some patients, an inflammation of the sebaceous follicles, and, when allowed to continue, bromide eruption often extends to other parts; arms, legs, trunk, and scalp, being sometimes attacked. A similar eruption sometimes follows the use of iodide of potassium, or the local application of tar.

Dermato-Syphilis.—A very large proportion of the skin cases we meet with here belong to the class of syphilides. There is no special skin disease belonging to syphilis. It merely imitates other diseases.* But it is a matter of the greatest import to have this question settled. Is it syphilis? What then are the points about an eruption which would lead you to suppose that it was a syphilide you had to deal with? Briefly, they are as follows: 1, A history of primary syphilis, or evidences of previous disease, such as nodes on the bones, dark-coloured, isolated cicatrices, especially on the trunk and upper extremities; 2, symmetrical dis-

* "Syphilis has, strictly speaking, no skin disease of its own. Syphilis, when it displays itself on the skin, appears there as an imitator—an imitator of the greatest subtlety, capable of representing any form of cutaneous eruption. * * It rarely, however, imitates urticaria, and still more rarely herpes."