

however, that softening is rare in cases of non-syphilitic arteritis, and that inflammatory changes undoubtedly occur, rather militate against this view.

In addition to these indirect results of the syphilitic poison, symptoms are undoubtedly due to gummata and their attending inflammation. Although a considerable number of instances of syphilitic paraplegia are recorded, there are as yet but few post-mortem examinations, so that our knowledge of this subject is somewhat fragmentary.

Gummatous formations usually occur in the membranes, and the attending inflammation infiltrates the surrounding structures, causing adhesions of the membranes to each other and to the cord, and not unfrequently destroying and displacing its elements. Heuban also describes gummata of the membranes appearing as minute nodules resembling miliary tubercle. The victims of hereditary syphilis are seldom attacked by disease of the nerve centres, but a few instances are on record in which the spinal meninges have been affected. Siemerling (*Arch. v. Psychiatrie*, 1888) reports a case in which the child of syphilitic parents was attacked by hemiplegia and aphasia at the age of five; two years later optic atrophy consecutive to neuritis came on, and ataxia of the limbs. At the age of 13, death occurred, preceded by vomiting and headache. At the autopsy, in addition to cerebral lesions, the spinal pia mater was covered with gummata, which encroached on and destroyed the fibres of the cord, especially the posterior columns.

From this brief sketch of the anatomical conditions it may be surmised that the symptoms are apt to be extremely variable. There is, indeed, nothing characteristic in the symptoms, and, as Gowers well puts it, "there is no combination of symptoms produced by syphilis that are not also produced by other disease." In the diagnosis, a history or evidence of syphilis must be carefully looked for, and even if absent, it is necessary to remember Broadbent's caution that the nervous system is frequently attacked by syphilis in those in whom evidence of the disease is lacking. In any case in which there is any reason to suspect syphilis, it is an imperative duty to use anti-syphilitic remedies