

I am, therefore, reduced to the extremity of avoiding many things which would, under some circumstances, prove not uninteresting, and to confine myself to homely and common things, to things of which both you and I have some knowledge, but as to which we may have some honest differences of opinion.

Medicine is not as yet an exact science. The most eminent medical man cannot, under any circumstances, say positively that a certain drug, or a certain combination of drugs will cure a certain condition. True, it is rapidly approaching this point, and the progress made in the past fifty years bids fair to show us the dawn of this much-desired era.

The exact nature of disease or diseased tissues is being studied as never before. The scientific physician is no longer satisfied to know that a certain drug has a beneficial effect in a certain disease, but he inquires what is this disease? What structures are involved? How are these structures affected? Why does this drug become beneficial? and above all, how can this disease be prevented? The empiric has no place in the practice of medicine to-day. It is not enough to know that a certain thing is good, but one must know why it is good. We are thus rapidly approaching an age when we will prescribe a certain drug for a specific disease and prescribe it intelligently.

For years quinine has been used as a remedy for malaria. It was and is a specific in that it inhibits the multiplication in the system of the specific malarial germ. The germ itself is the discovery of recent months, and it has been conclusively proven that it gains access to the system, not through the air or water or food, but through the bites of infected mosquitoes. The prevention of malaria, therefore, resolves itself into the annihilation of the mosquito. Until this is accomplished, we continue to give quinine, but we give it with an understanding of its action and a comprehension of its limitations.

It is but a few years since the sore throat, which accompanies scarlet fever and that of diphtheria, were believed to be identical. The same remedies were applied to both. Now we have studied and know the bacillus of diphtheria, and that knowledge has already led to the discovery of an antitoxin, which, injected into the system, counteracts the poisonous effects of the bacillus itself, thereby saving thousands of lives every year.

These are but illustrations of the fact that the scientific practitioner looks for cause, and not only wants to remove it, but also to know the exact nature of the agent