

between the anatomical changes in early and late generalised syphilis. This lack is well shown by a study of the syphilitic liver ; indeed, it is a study of several cases of syphilitic hepatitis which have been revealed in the post-mortem theatre at the Royal Victoria Hospital during the last four years, which has prompted me to select this more general treatment of the stages and forms of syphilis to bring before you this evening.

The reason why tertiary and secondary syphilis are regarded as so widely distinct is not difficult to comprehend. The disease is rarely directly fatal, especially now-a-days, and it is rarely that we obtain an opportunity to study the viscera during the earlier stages. As Jonathan Hutchinson has pertinently remarked : "The visceral pathology of the secondary stage might form a chapter in the history of syphilis which has not yet been written, and for which we possess few data. It is however, I feel sure, a great mistake to state that there are none to be obtained." In the address from which I take these words, an address which opened a celebrated discussion at the Pathological Society in London in 1876, he pointed out that abundant facts are on record to disprove the assertion that large gummata are not to be seen in the secondary stage. He noted that two cases of death from syphilitic disease of the heart which had come under his notice, had both occurred during the secondary stage and presented myocarditis with gummata, and in one of the two there were also distinct gummata in the spleen and in the testes, while he went so far as to state that the best example of gumma in the liver which he had encountered was in an infant.

To bring forward the evidence presented by the liver as to the identity of the anatomical lesions in the two stages, and as to the continuity or unity of the disease, it will be well to discuss the ways in which the liver is affected in syphilis and run over the different forms of specific hepatic lesions.

It is difficult to realise that scarce fifty years have elapsed since it was first clearly established that the liver is affected in any form of syphilis. The chapter in medical history bearing upon the liver in relation to syphilis is of some interest. Hutten and Fallopius and many of the earliest writers upon the morbus gallicus, held that syphilitic ulcers wherever appearing were the result of a corruption of the humours, the origin of which was to be looked for in the liver which had become diseased from the action of a volatile contagion. Others held that this organ was the first to be affected consecutively to disease of the genital organs. This was when every disease was regarded as due to a disturbance of the humours, and the liver being large and