other disorders, as well as by symptoms referable to the lung condition, I therefore proceeded to note with accuracy not only the physical diagnosis but the concurrent history of each case; and after ten years I found myself able to tabulate the features of 3,566 cases of phthisis which had been under my own observation, the object being to show, as far as possible, the conditions which either favored or interfered with prolongation, and which, therefore, were indicative of an advance towards cure or to a downward course. In actual practice I have found my hands much strengthened by the knowledge so gained, having often been able to prognostica e a prolongation of cases which had been stethoscopically condemned. I have recorded elsewhere minute details of the above researches.*

The contributions of physicians of the hospital to the literature of tuberculous disease are indicative of the mental attitude of the profession in those days. In 1851 Dr. Theophilus Thompson gave able lectures on the methods of recognition and clinical aspects of phthisis, which were published by his son in 1863. In 1863 Dr. Scott Alison contributed a volume devoted to physical methods of recognizing chest disease; and about the same time Dr. Cotton issued "Phthisis and the Stethoscope." In 1872 Dr. Douglas Powell published a short clinical work, which was followed by an exclusively pathological treatise by Dr. H. Green. In 1879 appeared a work on "Pulmonary Hæmorrhage," by Dr. Reginald Thompson, which was followed in 1884 by "Family Phthisis," an exhaustive illustration of the heredity of disease; while in 1887 the well-known work of Dr. C. J. B. Williams and his son appeared on the "Etiology, Pathology, and Treatment of Phthisis." These were all before the days of Koch and Pasteur, whose discoveries were unsuspected additions to knowledge.

We must not speak of the present day, when the staff comprises some of the most earnest and successful students of bacteriology. There were two subjects closely connected with modern pathology which were sure to present themselves as problems to be worked out by experience at the hospital—the influence of the newly-discovered tuberculin and the question of the contagiousness of consumption.

In 1890, in consequence of the expectations raised by the reports from Berlin, it was resolved to submit a certain number of patients to the treatment by injections of Koch's tuberculin, and it was used on twenty-eight phthisical patients—eighteen males and ten females—the average age of males being thirty, and of females twenty-one.

The patients belonged to a class which generally improved under treatment by a good hygiene and suitable dietary:—

Tuberculization without cavity	17 cases.
Both lungs affected	7 "
Unilateral cavity, limited	8 "
Cavity in both lungs	1 case.

The tuberculin was supplied to the hospital from Berlin, under Dr. Koch's directions.

*Extracted from "Elements of Prognosis in Consumption," by James E. Pollock, M.D. *Longmans*, 1863.