puriform fluid, although its existence was discovered only after excision.

Such conditions of chronic absorption of bacterial products may occur in the small or nearly atrophied tonsil, as well as in the hypertrophied one. It is easy to see how the normal process of retrograde metamorphosis may effect an irregular contraction of the framework of the tonsil, with the result of narrowing one or more lacunar orifices, and the production of a bottle-shaped condition of the crypt. We may say that excision of the tonsil should be recommended not only if the tonsil is large and causes pressure symptoms, but also if faulty drainage exists, and symptoms of absorption are present. In the latter case, the size of the tonsil plays no part in our decision as to the advisability of operating. Our guide in reaching this decision is the discovery of lacunar retention in association with symptoms of toxic absorption.

We have so far discussed the conditions arising from the absorption of bacterial products into the system. As I first pointed out, bacteria themselves probably enter the system only rarely through the tonsil. Nevertheless, they are known to do so in certain instances, and such a penetration is probably more frequent than has hitherto been suspected. I have found a definite infection of the tonsillar tissue itself by pyogenic micro-organisms in certain cases of acute tonsillitis, where it was possible to demonstrate cocci and abscess formation in the center of the follicles themselves. After infection of the follicles has once occurred, the abscess proceeds to enlarge, and most frequently discharges into the crypt, but at times may rupture in the opposite direction, namely: into the efferent lymph channels, and give rise to circumtonsillar abscess.

Frequent instances of bacterial invasion of the system through the tonsil are tuberculosis and infectious arthritis. I have seen numerous cases of tubercular cervical adenitis where the tonsils were of normal size and appearance, and yet inoculation of the tonsillar tissue into guinea pigs was followed by tuberculosis of the animals. Whether in these cases the tubercle bacillus had produced local lesions in the tonsillar tissue which escaped observation or whether it was vegetating in the crypts without formation of tubercles remains to be determined.

Evidence is accumulating in the case of infectious arthritis, that the tonsil forms a frequent portal of entry, yet the tonsil in a given case may be of normal size, and show nothing on clinical inspection, although after excision, I have always been able to find evidence of lacunar retention. It is probably not necessary, therefore, that the organism of this disease entering the system through the tonsil should create local reaction in this structure. It would seem probable that a condition of faulty drainage from the crypts would afford a given infectious organism better opportunity to remain in contact with the lacunar epithelium, possibly multiplying upon the detritus there found, and upon a favorable

opportunity of becoming drawn into the tonsillar tissue with the current of buccal fluid.

THE PROBLEM OF VENEREAL PROPHYLAXIS; SOME REMEDIAL SUGGESTIONS RELATING TO IT.

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THE time appears to be ripe for positive steps to be taken in the direction of systematic and scientific prophylaxis of venereal disease. Through the efforts of men and women of energy and persistence, that other universal scourge, tuberculosis, has been taken in hand, and to all observers it must be apparent that considerable headway has been made in the fight against this devastating disease. Already the public has learned the dangers of tuberculosis, and what is still more important it has also learned how the disease spreads and how its further extension may be prevented. Making due allowance for the differences in the character and manifestations of venereal diseases and tuberculosis, we can and we must adopt similar measures in any attempt to diminish the far greater ravages of the diseases of venery; and the methods that have been productive of success in the fight against tuberculosis will likewise succeed in the campaign against these social diseases.

In order that we may have a proper view of the matter in hand, let us briefly consider the conditions we have to deal with. As medical men, let us first of all eliminate entirely all questions of morality. This is of the highest importance. Let us deal with medical and social conditions as we find them, not as they ought to be in an ideal community; for if we adopt a wrong point of view, we create for ourselves a wrong picture, a picture that does not easily lend itself to our aim and purpose.

It goes without saying that first and foremost in any discussion of venereal disease, is the subject of the "social evil," so-called, or prostitution regarded as an existing institution. Let us begin by admitting now and here that prostitution is a well-established condition, and not a theory; that it has been with us from time immemorial, and that it promises to remain with us until time shall be no more. Medical men cannot deal with its causes; we have only to deal with its consequences expressed in the form of disease.

The relationship between venereal disease and prostitution need not be demonstrated; if we could, with one blow, remove the latter from the social economy, a large and preponderating element in our problem would at once disappear. But the social evil is an economic and not a physical disease,—a disease that social and economic conditions produce. It is, therefore, the duty of our statesmen, our clergymen, our social economists to deal with the causes that encourage prostitution, just as it is our highest moral duty to bring to their aid our knowledge

of the medical conditions which result from prostitution. Working together, there is no reason why satisfactory results cannot be attained.

The problem of venereal prophylaxis is based primarily on the fact that man is endowed by nature with animal passions which are, to a greater or less degree, subject to control by the individual. Society, recognizing the dangers of the promiscuous gratification of these passions, seeks to regulate them by the institution of marriage, and we may safely say that in an ideal community, where early marriage and a healthy moral tone were the rule and not the exception, the problem of venereal prophylaxis would not, yes, could not, arise. In existing conditions, however, early marriages are becoming more and more rare, and even the institution of marriage itself is being seriously threatened by the ever-increasing cost of living, the growing standards of living and the difficulties encountered in earning enough to meet these constantly growing demands. This brings into our discussion the crux of the problem,—the unmarried man and woman, deprived by these economic conditions of the opportunity of gratifying a natural passion according to the established laws of society; illicit sexual relations necessarily follow.

Girls and unmarried women suffer even more than men do, from these conditions. The number of unmarried females is constantly growing; they are thrown upon their own resources, often in competition and association with men, and—only the strong survive. The weak fall by the wayside, and are trampled upon by the hordes in their wake. In this way, prostitution secures its recruits, and the venereal diseases thrive.

Whenever the social evil has been discussed, it has been the fashion to direct our thoughts almost entirely upon the unfortunate women engaged in this occupation as a means of livelihood. The male element in the equation has always been overlooked. Segregation, ostracism, imprisonment in jails and hospitals, and virtual extermination itself have been proposed as remedies, the advocates apparently believing that the women are vicious criminals, and forgetting entirely that they are merely passive agents in what society terms the immoral act. We may wipe out every trace and vestige of venereal disease among the women of the universe, but so long as one man remains with an infectious venereal disease and a strong sexual appetite, we shall still have with us the problem of venereal prophylaxis. Our attack must, therefore, be directed at both sexes, and principally, in my opinion, at the male sex.

I believe that the professional prostitute should not be considered by law or society, as a vicious criminal, even though she wear the stigma of the law; I believe she does not engage in the occupation from choice, but from dire necessity; and that she is not a complacent agent in the transmission of disease. Let us feel that there was a time in her life when she, too, had ideals, and hopes, and ambitions, not different

from those of the rest of the world's women, but that she fell in the struggle for existence, a victim of social conditions and human passions. Let us consider her unfortunate, not criminal, and let us deal with her as such. This will make the solution of our problem much less difficult of accomplishment.

We must feel the same way toward the vast army of clandestine prostitutes,—girls and women, who, for the pleasure they find, or for the finery and luxuries which they could not otherwise enjoy, submit to the embraces of their clandestine "lovers." This army is recruited in the factories, shops, business offices and the stage,—wherever, in fact, earnings are small and tastes in the matter of clothes and entertainment are in inverse proportion thereto. These girls are not necessarily bad. Most of them are simple-minded and untutored, and often ignorant of what they are doing and the risks they are running; their knowledge comes to them too late. They harbor a large amount of venereal disease unknowingly, and constitute a very positive danger to the community, for they take no measures to avoid disease, and do not recognize the fact that they are diseased until it is too late to prevent considerable damage to themselves and to those who cohabit with them.

Faithless married women are also to be classed with the latter as real dangers to the community, for they disseminate venereal disease to an astonishing degree, not only infecting their paramours, but often their innocent husbands and children as well.

Let us now consider the males involved in our equation. We have to deal, on the one hand, with the *roué* or libertine and, on the other, with the occasional patron. With the former we need not waste much of our time. He is beyond our reach and nothing that we can say or do will have much if any effect on him. He is the battle-scarred veteran of many an encounter with venereal disease, and he has become practically immune. What remains of his scars he has little regard for,—he has had them so long. His morning friend, the *goutte militaire*, is an old friend, and never deserts him. He feels none the worse for its presence; neither do his female companions who, like himself, are more or less immune to fresh infection.

It is the young man of fifteen to twenty-five, the occasional patron who seeks the unlawful embrace because of the demands of nature, whom we have to consider. This is the young fellow who comes to us with his virgin attack, horrified by the chancre or the urethral discharge. His knowledge of venereal disease is absolutely *nil*, or extremely limited and perverted; he swears a big oath that he will never again indulge in the prohibited embrace. He has heard on the streets that sexual congress is necessary for his health and well-being, and it is hard for him to understand how it happens that the fountain of health can be lined with the germs of foul disease. Every new development of the disease opens his eyes to the dangers he has been subjected to, and

he wonders that he was not attacked sooner in his career.

To say that this young fellow is a criminal well punished by nature for his indiscretions, and to treat him as such, is preposterous. He must be dealt with as an ignorant youth, who knew not the dangers he was courting in what he thought was an act demanded by nature. To my mind it is the fault of society that he did not know the risk he was running. Surely it is his misfortune; and we might safely assume that had he known the serious consequences of his act, he might have found strength and courage to resist the cravings of his sexual organs.

We may, therefore, safely sum up the situation in this wise: Prostitution as a *moral* question is beyond our province, as it is beyond our powers; that we have to deal with professional and clandestine prostitutes, who are, in great part, infected with venereal disease, and who transmit it to their patrons; that men seek the unlawful embrace without vicious intent, but because of nature's demand; that the common street education of young men teaches them that it is unhealthy to abstain from sexual intercourse; that young women, in all classes, but especially those who are dependent on their own efforts for a living, are pursued and fall, victims to the temptations of men; that they are soon infected with venereal disease, that they in turn infect others, and thus the endless chain grows.

Now, is there a remedy that we can apply to this scourge? Suffice it to say, that, next to tuberculosis, and, possibly, not excluding it, venereal disease is the most serious problem with which society has to contend. From the medical, political, social and economic points of view, venereal disease looms up as the greatest of all terrors to society, — a terror not only to him who has been infected, but to all with whom he comes in innocent contact, and even unto the generations that follow him. It is for this terrible state of affairs that we are seeking a remedy.

It seems wise to direct our attention to the two great divisions of the subject, and study them separately: (1) Professional and clandestine prostitution, the "social evil," so-called; (2) the male element of our population, without whom prostitution could not exist.

1. As to the social evil: Many take the view that the entire matter of venereal disease is included in the term "prostitution." I am strongly opposed to this view. I am convinced that if it were possible to wipe out the institution of professional prostitution, and all the unfortunates who live by it, we should still have the problem of venereal disease to deal with, and the situation might, very likely, be far more serious in its nature than it is to-day. Prostitution is, after all, a safety valve for society. Society created it, society must tolerate it and society must minimize its ravages. Prostitution is, however, but one single element in the problem we have in hand, but being the most prominent and most easily approached, we are apt to con-

demn it as being the source of all our ills. I do not defend nor advocate prostitution when I say that it will never be done away with, and that it would be a most unwise thing to do, granting that it could be wiped out. We must recognize prostitution as an essential element of modern society, — an institution that has become as much a part of civilized life as marriage.

In many parts of Europe, prostitution is recognized by the government, and dealt with in various ways, with more or less success. Segregation and regulation are the prevailing methods of dealing with this question. In American cities, however, we close our eyes to its necessity, bury our heads in the sands, and loudly proclaim, so all may hear, that prostitution is a crime and all those who are involved in it are criminals. Meanwhile, those engaged in the traffic go about their business, more or less secretly, without supervision or control, and spreading actual disease and moral disease wherever they find a congenial soil.

We thus permit the traffic to go on in a spirit of hypocrisy, enshrouded in darkness, and admirably serving the purpose of enabling public officials to enrich themselves by exerting petty blackmail and extortion upon the wretched women of the craft. From time to time, a wave of reform sweeps our cities, and well meaning men and women assume the task of ridding the town of vice. We know, from experience, that they simply aggravate the conditions, for they disturb the traffic, and disseminate it to hitherto uncontaminated sections. What is accomplished by these waves of reform? Experience has shown that the police officials are the greatest gainers. They raise the rates for protection and get more blood money out of their helpless victims. These remarks and views may seem much out of place in a medical article, but I am convinced that they have a decided bearing on the question under discussion. We must expose the naked truth at all costs, if we would be true to ourselves. Our treatment of prostitution in American cities, especially New York, has been and still is a farce, to say the least, because we do not exhibit the courage of our innermost convictions. Not only are the women of the street unrestricted as to residence, but they carry on their illegal traffic without any supervision of any kind, except such as is afforded by the "protection" which they pay to the local statesmen and public officials. This "protection" apparently renders the traffic legal. Howard A. Kelly calls our method a "disastrous failure," and we cannot but heartily agree with him; on the other hand, official *réglementation* and supervision have been shown by recent observers to be equally unsatisfactory, for obvious reasons. Its advantages are more than offset by its disadvantages.

How, then, shall we treat this sore on the body politic? Perhaps the latest utterance on this subject at this writing is the remarkable paper of Dr. H. A. Kelly in the *Journal of the American*

Medical Association (Feb. 10, 1906). His answer to this question is summed up in these words: "A remedy there is, but it is not an easy remedy. It is of a drastic nature and acts on the whole system in order to purge this sore, cleansing the body of many noxious humors and sending good, sound blood to the spot. This remedy is a sense of personal responsibility which manifests itself under the form of an active aggressive interest in this as well as in other forms of *right doing*, by carrying on an unremitting personal campaign against them, wherever and under whatever guise they may be found. A *high standard of morals* must be maintained in *every avenue of life*, for nothing is more certain than that this impurity cannot be removed or even lessened, while the *business and social life* of the community remain *corrupt* in a *thousand different ways*.¹ . . . We do not need knowledge, as some of us imagine; we need transforming, regenerating power from without to enable us to accomplish that which our corrupt tendencies continually hinder. For this reason my own hope lies solely in God, and in prevailing on men to look to Him for grace and strength to do that which they cannot of themselves accomplish."

One must needs be brave indeed, and arrogant as well, to offer even the slightest opposition to the views of so eminent a member of our profession as Dr. Kelly; yet, in all humility, it appears to me that Dr. Kelly's remedy is a Utopian one, and does not reach the spot. Dr. Kelly seems to forget that we are *not* living in the millennium; "right doing" as a general rule of life has *not yet* become a fad; a "high standard of morals" is *not* maintained in every walk of life, nor even in some walks of life; the business and social life *are* "corrupt in a thousand ways," as has been demonstrated by the muck-rakers and others.

Surely, Dr. Kelly's remedy, if adopted by the world at large, would solve the problem of prostitution and kindred ills, and it would also solve many other difficult problems. It would render jails and prisons useless, for want of occupants; it would depopulate our almshouses and our asylums; it would settle all problems of trusts, rebates and traffic rates and impure foods, better than any legislation can hope to do; it would render a mortal blow to socialism and other isms with which we are afflicted; in short, it would revolutionize mankind, and make the race as nearly perfect as the human mind can conceive. But can we hope to see so revolutionary a change in human thought and action? The church and state have failed these thousands of years to create that feeling of "*right doing*" and the high moral tone that Dr. Kelly hopes to see created. Can we hope to do in our day that which church and state have failed of accomplishment these many centuries? Let us rather attempt to do that which appears to be possible, even though the methods that must be adopted jar on our tender sensibilities at first sight. Let us accustom ourselves to the

thought that we are dealing with *existing conditions* and with *human beings* of the *present day*; let us recognize their weaknesses and their passions. I am sure, if we do this, ever at the same time striving to inculcate habits of right doing and high thinking, we may reach the goal we have set for ourselves. In other words, LET US BE PRACTICAL.

In the siege of a city, the first aim of the attacking forces is to completely surround it, and then compel a capitulation by starving its defenders, at the same time conducting a series of assaults from various points of vantage. I propose in dealing with our problem of prostitution, that we adopt similar tactics. Conceding that we cannot wipe out prostitution, our first aim should, therefore, be to bring the forces of evil, as we understand them, into a well-defined area, and then, by a carefully drawn plan of campaign, reduce their numbers and effectiveness by minimizing their patronage, and thereby diminishing their capacity for harm. Let it be distinctly understood that I am not advocating or proposing a scheme of official supervision and regulation of the social evil. I am opposed to this Continental idea, because it is foreign and repugnant to American sentiment, and because it does not accomplish its alleged purpose. I do, however, believe that unofficial segregation and a treatment of the evil by common sense methods will not only be found to be practical but effective as well.

I propose that we fling away our mask of hypocrisy and sham modesty, and look upon this question with open eyes and a frank mind. Our first step is to change our attitude towards prostitution. We should regard prostitutes not as criminals, engaged in a criminal traffic, for which they are to be "bled" and exploited, but as unfortunate members of the social fabric, — social lepers, if you will, engaged in an unclean traffic made necessary by social and economic conditions, — a traffic which by its very nature requires that it be conducted in such a manner as not to assert itself in public, and conducted so as not to constitute a menace to the physical and moral welfare of the community. The fact that a woman is a prostitute should not *per se* constitute a cause of legal action against her. I advocate such a treatment of prostitutes by the community as will permit them by *common consent* (not by official legislation) to live unmolested in certain well-defined sections of the city, so long as they conduct their traffic without maintaining a public nuisance. Soliciting, disorderly conduct, boisterous noises, etc., should constitute the *only* cause for police interference. This rational policy would at once remove the opportunities for official extortion and graft, and would encourage an orderly conduct of the traffic. In other words, eliminate the power of persecution which is now enjoyed by the police. Left to an enlightened public sentiment, the traffic would soon become localized completely, quarantined, in fact, in a well-defined district, a district that would harbor all the members of

¹Italics not in original.

the craft, without fear of contamination of the innocents beyond its borders. Once this result was attained, a dead-line, such as exists at present in the financial district, as regards well-known thieves and suspicious characters, would be created, outside of which it should be made impossible and unprofitable for the traffic to extend. To solicit or to conduct the traffic of prostitution beyond the "dead-line" should be made punishable by a long term in prison at hard labor. Fines should not be imposed. In brief, I propose that the community deal rationally with these unfortunate women; so long as they live in retirement in their own district, and conduct their traffic without disturbing the public peace, they should be let alone, but if they should pass beyond the "dead line," or in any other way become a public nuisance or menace, they should be made to suffer the severest penalties that the law can inflict. In this way, I believe, we shall be able to localize the evil, without official sanction, thus conforming with the Anglo-Saxon idea of not giving legal recognition to the existence of prostitution, and at the same time eliminating this most profitable form of graft.

When it becomes known to those engaged in the traffic that so long as they abide by these unwritten laws they will not be interfered with, they will quickly conform with the requirements of the situation, and conduct themselves in an unobjectionable fashion. Self-preservation will dictate medical supervision and personal care, such as is rendered impossible under existing uncertain conditions; the law of the survival of the fittest will insure that only those who are physically well, or nearly so, be permitted to continue in the traffic, and thus the evil will bring about its own antitoxin and cure.

Having succeeded in concentrating the evil in a well-established district, let us now devote ourselves to the task of diminishing its patronage by such means as can be utilized. In other words, we have reached our consideration of the public.

Education. — This should be the cornerstone of any attempt to minimize the extent of venereal disease. Educate the men, young and old, to the dangers of professional and clandestine prostitution, and the fight is half won. Educate the women, young and old, and clandestine prostitution will receive its deathblow. Educate the rising generations that they may know better than their predecessors what they must avoid, and how to do it. You will not spoil their innocent (?) minds when you substitute for the sexual knowledge gained in the streets and in the lavatories a correct appreciation of the possibilities for harm that lie in the abuse of the sexual function. This should apply equally well to girls as to boys.

The question naturally arises, How shall we reach the masses and what shall we tell them? To reach the masses, we need but follow the lines laid down in the propaganda waged against tuberculosis with certain modifications. A na-

tional organization with branches in every state and territory should be organized, which in turn shall be subdivided into a number of sub-committees, to each of which shall be assigned the task of reaching a certain portion of the public. Time and space in this paper forbid an elaborate scheme of sub-committees, but a few will serve to illustrate the idea:

(1) Committee on Public Schools: Inasmuch as a large number of children leave the schools before graduation, to enter shops and factories, it should be the aim of this committee to place within reach of every child of school-going age, a certain amount of knowledge of personal hygiene and sexual physiology, consistent with the age of the child. It seems reasonable to expect that if children are to be taught the ravages of tuberculosis and of alcohol, they should be taught something of the far greater dangers of venereal disease that lie in wait for them at every turn.

(2) Committee on High Schools and Colleges: This committee would supplement the work of the preceding committee. Here, plain words can be spoken. The pupils are no longer children, but young men and women.

(3) Committee on Working Men and Women: This committee, utilizing the labor unions and other organized forces, should aim to reach every man and woman who works at a trade. The effort is a gigantic one, but it is justified by the end to be attained.

(4) Committee on the Army and Navy and other military bodies.

(5) Committee on Shops and Factories: This committee, working among the young girls and boys employed in these places, can do considerable toward reducing the number of clandestine prostitutes. It is in these shops and factories that most of the seeds of immoral living are sown and carried to fruition.

(6) Committee on Churches and Affiliated Religious Bodies.

(7) Committee on Young People's Clubs and Settlement Houses.

(8) Committee on Fraternal Orders, etc.

Each of these committees can be made independent of the others, at the same time doing its work in co-ordination with them, and avoiding wherever possible any overlapping or duplication. The particular methods to be adopted by the respective committees must necessarily depend on the class of persons to be reached by them.

The work having been divided among these committees, the next step would be to map out a campaign, having for its objective point these two distinct objects in mind: (1) The exhibition of the dangers and results of venereal disease; and (2) the methods by means of which these diseases can be avoided.

(1) The community knows lamentably little about the dangers and results of venereal disease. Various methods must be skillfully employed to bring these facts to the public notice, without indiscriminate publicity. The most effective method of reaching large numbers of people is

the lecture platform, and I have no doubt that lectures on venereal prophylaxis, given to men and women separately, would not only attract large numbers, but accomplish excellent results. The stereopticon can be utilized to the greatest advantage in the system of lectures or meetings proposed for this campaign, to illustrate to large or small audiences the various lesions of venereal disease. Such a lecture, attended by men or women, would be far more effective in the diminution of venereal disease than half a hundred sermons from the pulpit on personal purity. The human mind naturally rebels at the sight of the noxious lesions which venery produces, and nothing can be more effective than a vivid illustration of them, coupled with a warning and instruction as to methods of avoiding them. Especial attention should be given to the dangers of venereal disease to the innocent, and also to the relation of venereal disease to marriage. Nature abhors the thought of the childless marriage, and if it were pointed out that a large proportion of sterile marriages, abortions and gynecologic diseases are due to venereal infection before and during marriage, a wholesome fear of the disease would be created, that does not at present exist in the minds of the public. In addition, a liberal distribution of well-prepared pamphlets or booklets, specially adapted to particular classes or bodies of men or women, would be most effective. At present, a number of excellent little pamphlets can be obtained, giving all the facts in the case, strongly and effectively. The machinery for their distribution should be created by this Association.

This campaign of education would necessitate the employment of well-equipped men, who would devote their evenings to lectures before bodies of workmen or other organizations. Women similarly assigned to reach bodies of young women would do much for the movement.

(2) As to methods of avoiding venereal disease, the problem is not so simple, nor so easily dismissed. Two general lines of instruction suggest themselves: (a) As to the practice of total incontinence, and (b) as to the adoption of prophylactic measures by those who will not or cannot abstain.

(a) As to continence: Two questions will at once arise in the public mind: (1) Is continence possible? and (2) Is it consistent with good health? That it is possible, is certainly true, and needs no proof. Men who have indulged their sexual appetite to extremes have been known to abstain for a long time under certain conditions of mind and body. There need be no dearth of proof as to the possibility of masculine continence; but as to such continence being conducive to perfect health is not so easily demonstrable. The medical profession would surely split over this question, if it were submitted to its members for an aye and nay vote.

On the surface it does not appear that a physiologic function such as the sexual impulse, an impulse that has been the dominant passion in human lives since the beginning of time, can for

many years be held in abeyance, subject to more or less constant irritation and temptation, without bringing about a pathologic condition in the organs involved. I believe the personal equation enters into this question to a considerable degree; continence for one man may be without deleterious results; for another, it may rank with the impossible. At any rate, it would be well, before any positive statements are made as to the advisability of advocating universal continence, that a thorough study of this subject be made, so that positive and well-founded information on this much mooted question might be at hand. As to continence as a prophylactic against venereal disease, we can safely say that medical science knows of but one *sure* prophylactic against venereal disease, namely, continence. Those who will abstain from promiscuous sexual relations will surely not be infected with venereal disease. But let us not, however, lead ourselves into the belief that the propaganda of continence and abstinence will in our time, or even in the remote future, develop into a fad. Not unless human nature changes, can we hope to see this policy universally adopted. Let us, rather, consider our time well spent, if we succeed in converting a small number of impressionable young men to the policy of continence, and in bringing to a larger number a realizing sense of the dangers, real and avoidable, that lie in the promiscuous gratification of the sexual appetite.

(b) But what shall we do with that vast army of men who decline the panacea of abstinence? Shall we consign them all to the devil and say to them "Either abstain altogether or let what may happen to you"? I do not think this attitude would be the proper one for us to assume. I believe that it is our moral duty not only to advise abstinence, but to offer to those who will not or cannot accept this advice an alternative, in the hope that by this means we shall be able to improve the present condition of affairs. To my mind, the most rational and practical plan with which to meet this situation would be to adopt the familiar injunction, "Be good if you can; if you cannot, be careful." In other words, let us urge upon all males the advisability of abstaining from promiscuous sexual relations if they would remain uncontaminated with disease; but to those who refuse to abstain entirely, let us urge the necessity of exercising extreme care and adopting such measures as will tend to diminish as far as possible the danger of venereal infection. I know this suggestion will be opposed on the ground that it is a compromise with vice. But I do not so regard it. I am convinced that such measures are not only justified, but absolutely demanded, if we would make headway against venereal disease. Let this be our second line of attack. Let us advise and urge a policy of extreme care in the selection of one's sexual companion, and, in addition, let us recommend the use of such mechanical or chemical agents as might be of value in the direction we are aiming. Under the former heading the rubber

protective condom has been advised, and is being extensively used. Far better, however, are the chemical preparations so extensively employed in certain parts of Europe. Probably the most effective of these, as I have been convinced in my own practice, is a strong solution (20%) of protargol in glycerine, applied to the fossa navicularis immediately after coitus, with a camel's hair brush or a small syringe holding a few drops. This method has also been recommended by von Zeissel, Frank, Valentine, Marschalko, L. Weiss, Welanders, Joseph and Kopp. Silver nitrate and some of the newer silver salts can be used in the same manner, but I have had no personal observation of their value. Another very effective prophylactic method is to irrigate the anterior urethra with a weak solution of hot permanganate of potash or other mild antiseptic, within twelve hours after coitus. These measures offer a reasonable security against urethral infection. Externally applied, a solution of mercuric bichloride 1-1000 may be recommended for preventing extra-urethral infection.

It cannot be said that these measures will positively prevent venereal infection, but it must be admitted, even by those who are opposed to their employment on moral grounds, that they are capable of materially diminishing the risk, attendant upon promiscuous sexual congresses and that is the end we are seeking. I do not assume for a moment that our aim is to raise the moral tone of young men and women. Other agencies exist for that purpose. We are morally bound to offer any expedient or remedy that will minimize the dangers attendant upon promiscuous sexual living, not so much because of the individual immediately concerned, but on account of the innocent men, women and children with whom he comes in contact. It is on their behalf especially that everything possible should be done to reduce the risks of venereal infection, and for this reason, above all others, I strongly advocate the employment, wherever possible, of the prophylactic measures just mentioned.

Before concluding, it seems well to mention some special lines of attack that may also be followed with good results, especially in the prevention of venereal infection in the innocent:

(1) As family advisers, medical men are in a position where they can talk and act frankly. The physician should use his influence, wherever possible, to see to it, that his patients about to marry are not suffering from the remains of former venereal infection; and fathers of young women who are about to enter the new life should be taught to demand of their daughters' prospective husbands, a clean bill of health, signed by a reputable physician, after a careful examination. The public should and can be educated up to this requirement.

(2) There should be severe legal penalties against men or women who marry, knowing that they are still suffering from infectious venereal disease.

(3) Those who are infected with syphilis,

gonorrhea or chancroid should be taught by their physicians the dangers of infecting innocent persons with whom they may come in contact, and should be instructed how to avoid this risk. A brief, well written and plainly worded little pamphlet or tract should be given to every patient in private or institutional practice.

(4) Barbers, dentists, manicures, chiropodists, nurses, midwives and physicians too, should be reached by a systematic campaign of instruction and warned about the care of their hands, instruments, dressings and utensils, so as to reduce to a minimum the possibility of transferring infection from one patron to another and to themselves.

(5) Waiters, bartenders and others who serve and prepare food and drink in public places, and their employers, as well, should be similarly reached and warned and instructed as to the importance of cleanliness, not only of their own persons, but of the dishes and utensils they handle. The abominable and dangerous practice of removing cups, glasses, etc., with the fingers inserted inside the vessel should be broken up. The public should be warned of the dangers lurking in bar glassware, etc., and should demand that the most scrupulous cleanliness be employed in hotels, restaurants and cafés. The filthy roller-towels found in these places should also be abolished.

(6) Occasional medical examinations of persons engaged in the preparation and serving of food and drink should be encouraged, to determine the presence of possible infectious disease.

(7) Nurse-girls, domestics and maids should not be permitted to sleep in the same beds with children, for obvious reasons.

In short, I am strongly convinced that an intelligent, well-directed effort along the lines herein indicated, will accomplish a great deal toward decreasing the sum total of popular ignorance on the subject of venereal disease, and simultaneously will reduce the amount and extent of venereal infection and its consequent miseries.

Clinical Department.

SEPTIC INFECTION THROUGH THE FAUCES.*

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SEPSIS by way of the fauces is not very uncommon, especially to those who see many throats. The channels of invasion of the economy are most numerous around the mouth and fauces, and the tonsils themselves while organs of protection are also, as has been pointed out by Dr. J. L. Goodale, ports of entry. Fortunately, however, the cases which are commonly observed are by no means so severe as one reported by Dr. E. Channing Stowell, but occasionally septic invasion is so great, especially when caused by the streptococci, and also by the pneumococci that a sudden septic condition develops which is rapidly fatal, or at least exceedingly alarming.

* Read at a meeting of the Boston Society for Medical Improvement, March 12, 1906.