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A review of his paper on pigtyphoid appears in the Canadian Journal of Medical Science, 1878, vol. III, p. 318.

ON THE PATHOLOGY OF THE SO-CALLED PIGTYPHOID. By WM. OSLER, M.D., Professor of Physiology and Pathology in McGill University, and the Veterinary College, Montreal. (Bailliere, Tindall, & Cox, King William Street, Strand.)

In this pamphlet, Dr. Osler gives an account of five experiments, made by himself, of inoculation of this disease, in healthy pigs, together with the post-mortem appearances furnished by the disease. From his observations, it would appear that Budd and Axe were quite in error in regarding this affection of the pig as the analogue of typhoid fever in man; and Dr. Osler is altogether disposed to confirm Murchison's view of its resemblance to dysenteric affections. One thing seems certain, however, that it enters into Virchow's category of diphtheritic diseases. About the time that Dr. Osler was making his experiments Dr. Klein and others were engaged in a similar investigation. Dr. Klein had verified Prof. Axe's demonstration of the existence of the contagion in the serum of the skin, and had also induced the disease by inoculation with material from the intestine, but it was reserved for Dr. Osler to successfully utilize the juice of the lymphatic glands for the same purpose; and he was likewise the first to prove that the contagion is contained in the lungs, by the successful inoculation with caseous matter from the bronchial tubes. The following are Dr. Osler's conclusions:-

1. The so-called pigtyphoid is a disease SUE GENERIS, presenting anatomical and clinical features distinct from any other affection.
2. It presents no analogies, either pathologically or clinically, with typhoid fever in man.
3. Neither has it any affinity with anthrax, as claimed by some continental writers.
4. If we take the intestinal lesions as characteristic, the disease must be regarded, with Dr. Murchison, as dysenteric in its nature; although the cutaneous and pulmonary affections, as well as certain of the clinical features, meet with no parallel in human dysentery.