

inoculation of man from animals is a different thing from infection by way of the alimentary tract. There may, moreover, be differences in the development and virulence of the tubercle bacillus in different parts of the organism to still further complicate the question. There is still another factor with which to reckon, and that is the universal distribution of the germs of human tuberculosis which renders impure almost every possible experiment in this line. We can not well exclude the possibility of other sources of infection in any alleged case of transmission of animal tuberculosis to mankind.

It would seem that after all the study will be largely confined to the lines already followed by Koch, viz., clinical and postmortem observation. There are, however, many suggestive side-lines, and there is a wide range of possibly useful facts in the enlargement of our at present imperfect knowledge of the natural history of the microbe and its closely allied forms. The study of human resistance and immunity is also promising; it may come finally to the problem of just how much microbial invasion the average organism can stand under different conditions. We may find the danger of bovine tubercle a minimal one, and yet have to decide how far we are justified in neglecting it, and whether it can be differentiated in any case from that due to numerous other sources of infection that are ever about us. In the meantime we will do wisely to keep on the safe side, avoiding, however, the tendencies to exaggeration and unwarrantedly positive statements that have existed in the rather recent past. If Koch has excited a healthy scientific skepticism to stimulate research and replace the self-satisfied assurance of positive knowledge on a subject in regard to which there is yet so much unsettled, his utterances will have done an infinite amount of good.

THE MEDICAL PROFESSION ORGANIZING.

Whatever may be the reason the fact is the medical profession everywhere has become aroused to the necessity of organizing for something more than purely scientific purposes. This is true not only in the United States, but in the Old World also.

Last week¹ we gave an account of the Deutscher Aerztevereinsbund, or the German Practitioners' Association, which showed that this association during the past year had increased its membership in a remarkable manner. The most important fact shown, however, is that the Bund has taken up in an active, business-like manner the problems that are affecting the profession in Germany, problems that have their counterpart with us. It decided to establish a central office, or headquarters, in Berlin, and to place one of its members in charge; and it appropriated a good sum to carry out the objects the Bund has in view. Among these are to promote the ethical and material interests of the profession; to publish an organ; to supply infor-

mation on questions affecting the profession and its relation to the authorities, to the legislature, and to the professional and lay press, etc.; to assist in the organization of new sub-societies, and to endeavor to have the sums paid physicians by the sick-benefit societies increased; to combat quackery in every possible way, and otherwise to look after the material interests of the profession. This action was stimulated no doubt by the movement taken some time ago by those who were dissatisfied with the lukewarm methods of the Aerztevereinsbund, and who organized another society for the express purpose of carrying on the "battle of the clubs," and of solving the problems affecting the welfare of the profession. It is felt that this action on the part of the Bund will make it unnecessary to keep up the new organization that is having the effect of dividing rather than uniting the profession, a result which naturally follows a multiplicity of societies not working in a co-operative way.

The profession in Great Britain has been feeling the necessity of a more compact organization for years, and this culminated last week in a report to the British Medical Association by its committee on reorganization which calls for radical changes. From our foreign exchanges we learn of the same earnest effort in nearly every country to unite the profession for mutual good, for political influence, as well as for scientific purposes.

Coming back home we find that at least three-fourths of our state societies have appointed committees on organization, and that these committees are actively considering the problem of how to bring every physician in the state into the state society or one of its branches. The important changes made in its organic law by the American Medical Association at its last session, is only one of the events which is leading up to that much to be desired condition—a united profession in the United States.

PRO BONO PUBLICO.

Professor Osler got off a good thing the other day at the British Congress on Tuberculosis. During the opening exercises much was said of a nature flattering to the profession. Dr. Osler remarked that a large delegation had come over from the United States, but that it had not come like some of the "trusts" of which we have heard so much of late, and yet they represented a magnificent "trust." But while the motto of the ordinary trust was "damn the public," their motto was *pro bono publico*.

PROGNOSTIC SIGNIFICANCE OF OPTIC ATROPHY IN TABES DORSALIS.

It is a well-recognized clinical fact that the development of optic atrophy in the course of locomotor ataxia is generally attended with an arrest of the disease; so that this occurrence is considered of relatively favorable prognostic significance. No satisfactory explanation has hitherto been given for this strange coincidence,

1. JOUR. A. M. A., August 3, p. 338.