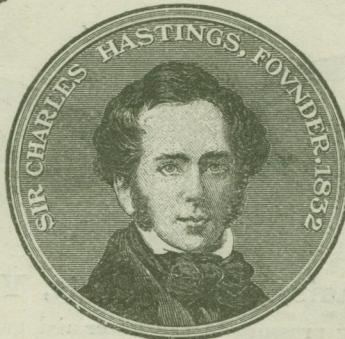


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CHRONIC INVALIDISM

ATTENTION has recently been drawn to the large amount of chronic invalidism of vague character for which no obvious cause can be assigned. On tracing the history of such cases it will often be found that continuous good health became gradually broken by more and more frequent intervals of malaise, slight depression, and inertia.

It seems certain that we are here confronted with instances of latent infection from sites where bacteria are protected from the activity of phagocytes. Frequently, in these cases, the blood shows a polymorphonuclear leucopenia and an increase in the number of eosinophile cells. Both the earlier symptoms and the later invalidity would seem to be due to the absorp-

tion of toxic protein substances resulting from bacterial autolysis.

The tonsils, gums, and certain other parts are not infrequent sites of such infective processes, but probably the commonest by far is the large intestine, under the influence of chronic intestinal stasis.

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