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## ASTHMA AND ALLIED CONDITIONS.

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So much has been written about asthma and its ætiology has been looked at from so many viewpoints, all of which, I suspect, reveal portions of the whole truth, that it is necessary to give some sort of confession of faith before making observations which must be regarded as one's own. All that I say will not be accepted by all present, but I have the consolation of knowing that you are all fully qualified to hold your own opinions and to denounce mine.

*Derivation.*—Greek ἀσθμα, gasping, panting, applied by Hippocrates to the ailment we know as asthma<sup>1</sup>.

<sup>1</sup> C. H. Armbruster, scholar and philologist, has given me the following note: The word ἀσθμα, panting, used by Æschylus and Plato, then applied by Hippocrates to this ailment. *Hipp. Aph.* 1248, *et al.*

*Clinical Definition.*—We associate the term asthma with paroxysms of embarrassed respiration followed by longer or shorter periods of complete calm, and with recurrences at more or less frequent intervals.

This definition would correspond to many cases of asthma but not to all. It would apply to what was termed true or spasmodic asthma, but the other form, chronic bronchitis or bronchial catarrh, with exacerbations of asthma, so-called bronchial asthma would not be included.

*Modification of Definition Needed.*—The clinical description needs modification to include the cases where the dyspnoea is continuous and paroxysms of increased dyspnoea are brought on by slight exertion, and to include the many cases where there are no paroxysms at all.

For reasons which I will state later, I hold that the terms "chronic bronchitis" and "bronchial catarrh," as we use them, should not be used at all when speaking about asthma, they are misleading.

The dyspnoea of asthma is both inspiratory and expiratory, more especially the latter, the expiratory phase of respiration being