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are so many that it would be quite impossible to give instruc-tions for following them all to their ultimate conclusions. Ability to recognize is an art to be gained only by practice. The order and methods of practice can, however, be made a profitable subject of instruction on lines leading to the Acquisition of that faculty. No appreciation of Thorpe and Whiteley's manual would be adequate without a realization of this. We are accordingly the more favourably impressed with the manner in which the authors have dealt with the task. The student who practises the directions given will have gained an excellent introduction to this branch of chemistry.

The series of illustrated clinical lectures and original articles which appear each quarter in International Clinics¹¹ deal with a variety of different subjects. Though most of the contributors are Americans, some contributions are always included from European countries, so that the series justifies its title. The special features we notice in the first volume for 1925 are three articles on mental disturbances, entitled "Remarks on the psychology of paranoia," "Amnesia and pathological stealing," and "Psychoneurosis in relation to general medicine." Another feature of this volume is the comprehensive review of the progress of medicine in 1924 which occupies the last eighty pages. The second volume of the series for 1925 includes three monographs. The first of these is a discussion of the present status of affections of the kidney. This is followed by an article on the systemic or cardio-vascular effects of arterio-venous fistulae. The third is a valuable review of the microscopic diagnosis and management of dysentery. Intestinal diseases receive prominent attention in this volume, for, in addition to the article already mentioned, volume il contains others on new growths of the digestive tract, cystic neoplasms of the ascending mesocolon, abdominal diagnosis, the relation of food to health, and abscesses about the rectum and anus. The third volume, in addition to the customary number of articles on diagnosis and treatment, general medicine, surgery, and pathology, contains also two monographs—one on thrombo-anglitis obliterans by Dr. Benjamin Jablons of New York City, and another by Dr. Philip Norman, entitled "Food combinations : the practical application of the new knowledge of nutrition to the physiological limitations of the digestive processes." The fourth volume contains three special articles-an historical sketch of Charcot by Dr. Garrison, an article on male sterility by Dr. Wolbarst, and a report on the tenth decennial revision of the United States Pharmacopoeia by Dr. H. W. Cattell,

The Pathological Society of Philadelphia edits and publishes its proceedings annually in a compact little volume,¹² and that its proceedings annually in a compact intrevolume, "and that for the year 1924 has just reached us. About fifty com-munications are reported therein, mostly very briefly in the form of author's abstracts. They cover all the various sections of the science of pathology, including bacteriology, immunity, and biochemistry. Oddly enough, two of the longest communications are from Englishmen invited to address the society. Thus a lecture by Professor A. V. Hill of University College, London, entitled "The present tendencies and methods of physiological teaching and research," is printed in full. Dr. J. W. McNee of University College Hospital Medical School addressed the society on some aspects of the metabolism of the bile, and his remarks are reported in a fairly long abstract. The volume contains the presidential address of Dr. E. B. Krumbhaar on experimental cancer, a paper which gives a valuable survey of the history of cancer research in recent years. The convenient size and sensible editing of these *Proceedings* might well be considered by those responsible for producing similar publications, for this paper-backed volume fits easily into ordinary bookshelves.

We have received the third (Geflügeldünger-Kwas) and fourth (Lab-Rüberkraut) instalments of the lexicon of nutrition.¹³ edited by Professors E. MAYERHOFER and CLEMENS (JOURNAL, June 6th, 1925, p. 1041). The subjects discussed include Pirquet's system of nutrition (gelidisi, the German equivalent of pelidisi), vegetables, sexual functions and nutrition, Grimod de la lieguière, "the greatest savant among gourmands and the greatest gourmand among savants," army commissariat in peace and war, including

¹¹International Clinics. Edited by Henry W. Cattell, A. M. Philadelphia, U S.A. Vols, I, H. III, and IV. Thirty-fith series, 1925. London; J. B. J. ppincott Company. 1925. (Med. 8vo: vol. i, pp. ix + 299, illustrated; vol. ii, pp. ix + 311, illustrated, vol. iii, pp. ix + 309, illustrated; vol. iv, pp. viii + 311, illustrated. 503, not the set of 4 volumes.) ¹²Proceedings of the Pathological Society of Philadelphia. Edited by Morton Moviucheon, M.D. New series, vol. xxvii; eds series, vol. xiv, containing the Transactions of the Society from January, 1924, to January, 1925. (Med. 8vo, pp. 108.) ¹³ Lexikon der Ernührungskunde. Herausgegeben von Pr. E. Mayer-hofer und Dr. C. Pirquet. 3 Lieferung und 4 Lieferung. Wien: Julius Byringer. 1925. aud 1925. (Sup. roy. 8vo. 3 Lieferung, pp. 289; illustrated; G.M.12. 4 Lieferung, pp. 288; illustrated; G.M.12.50)

an account of the feeding of the Roman army in the time of Caesar, cheese, coffee, Liebig, cannibalism, milk, aborigines, diet in renal diseases, and religious food ordinances. This bare enumeration is sufficient to show the variety of subjects dealt with in this iexicon, which will be a valuable work of reterence to the physiologist, the clinician, administrator, historian, and anthropologist.

Dr. OSKAR ROSENTHAL'S book on miraculous cures and medical patron saints in plastic art¹⁴ con ains over a hundred excellent reproductions of paintings, engravings, woolcuts, bas-reliefs, and statues by artists from the thirteenth to the twentieth century, including such well known names as Fra Angelico, Doré, Dürer, Michelangelo, Murillo, Raphael, Rembrandt, and Titian. The first fifty-lour plates illustrate passages from the Old and New Testaments and Apocrypha, while the remainder represent miracles performed by St. Anthony of Padua, St. Cosmas and St. Damian, St. Francis, St. Sebastian, Ignatius Loyola, and others, as well as statues of Aesculapius, Hygeia, and Im-Hotep. Perhaps the most interesting plate is a woodcut by Wolfgang Hamer, a fifteenth century artist of Nuremberg, representing St. Minus, the patron saint of sufferers from the French disease, listening to the prayers of the faithful, in whom the nature of their affliction is naïvely represented. The illustrations are pre-ceded by a brief description and an alphabetical list of the ceded by a brief description and an alphabetical list of the artists with the dates of their birth and death.

¹⁴ Wunderheilungen und ärztliche Schutzpatrone in der bildenden Kunst. Von Dr. Oskar Rosenthal. Leipzig: F. C. W. Vogel, 1925. $(7\frac{1}{4} \times 10\frac{1}{2}, pp. 42; 102 figures Paper cover, M.20; bound, M.24.)$

PREPARATIONS AND APPLIANCES.

A Pcritoneal Needle.

PREPARATIONS AND APPLIANCES. A Peritoneal Needle. THE following note on a needle for the intraperitoneal injection of fluid is by Drs. I. W. GALLANT and R. M. GORDON (the Evelina Hospital for Sick Children). It is often recommended in emergencies in infants that saline be given either subcutaneously or by the rectum. The common experience is that only a very limited amount of fluid can be so given reasonably—for example, 3 oz. in an infant weighing 5 lb. and 6 oz. in one of average weight. This can be repeated when absorbed, usually twice or at most three times daily. This means many needle pricks and the unpleasant sight of a ballooned struggling infant. The intraperitoneal injection of saline, though not so frequently recommended, possesses many advantages : absorption is more rapid, there is less discomfort to the infant, more can be given at one time, it can be given more frequently, and glucose solutions up to 10 per cent. and blood can be used for the injections. In the emergencies in question there has been no absorption of food and fluid for some time and there is non prospect of getting any in by another route. The value of half to one ounce of glucose to such an infant, repeated as judged desirable, is great. The objection is that there is some diager of perforating the intestine and of setting up peritonitis apart from injury to the intestine. The solutions for the injections must be aseptic. Tor these injections, which have been uni-formly successful in all our cases, we have used a two-end needle (both ends are outside the skim) made for us

(both ends are outside the skin) made for us by J. H. Montague (63, New Bond Street, London). A fold of skin and abdominal wall 1 inch wide halfway between the um-bilieus and symphysis

The needle is hollow to the middle of the curve, where an aperture is provided, and solid beyond that to the point. (Half size.)

J.H.MONTAGUE LONDON

vay octween the units solid beyond that to the point. (Half size.) bilieus and symphysis publis is gripped tightly between the thumb and forefinger and the absence of peritoneal contents appreciated. During the relaxation attending periods of expiratory approea, which periods are long in these infants, a rapid transverse stab is made just below the gripping fingers until the point of the needle emerges from the opposite half of the abdomen. The needle is then adjusted. The fact that the aperture is in the peritoneal cavity (which we have verified *post mortem*) can be at once felt by the case with which the injection is made; when extraperitoneal, bulging is produced. In these infants the abdominal wall is very lax and an easily safe margin can be raised. We have used it mainly in severe gastro-enteritis and collapsed premature infants. We have had no bad results from the actual injections, although of course, many of these infants have died, as the method has only been used, so far, when the patient seemed to be *in extremis*.

have died, as the include also only been about the happened on patient seemed to be in *critrinis*. The injection sometimes sets up vomiting; this happened on one occasion when this distressing symptom had apparently ceased. This risk can be diminished by injecting slowly. In those cases where vomiting occurred we felt that death was inevitable whatever was done.

whatever was done. *Calculation of Dicts. Calculation of Dicts. The metric system is, of course, a mystery to a large* proportion of the inhabitants of these islands, but these cards *will enable anyone to compose a diet containing, say, 60 grams of*

carbohydrate by means of simple addition. Each card contains five columns giving the name of the food and the quantity in ounces, and the remaining columns give the content of protein, fat, and carbohydrate in grams and the calorie value. The idea is extremely simple, and a box of cards containing details of more than sixty foodstuffs costs 2s. 9d. It can be obtained from Messrs. David Challen, Ltd., 10, City Road, London, E.C.1.

Pure Thyroxin.

Pure Thyroxin. We must congratulate the British Drug Houses on their enter-prise and skill in preparing pure thyroxin on the commercial scale. An impure product has been on the market in the form of tablets, but it has been offered at almost prohibitive prices. A pure product (sodium salt of pure thyroxin B.D.H.) is now available at a rate equivalent to £11 5s. a gram. This represents a very great reduction on previous prices. The dosage of thyroxin ranges from 0.2 to 2 mg. a day, and the cost from a penny to sixpence a day. The activity of preparations of duied thyroid varies greatly, and unfortunately no reliable method of standardiza-tion has yet been devised. Pure thyroxin B.D.H. consists of a chemically pure substance of known activity, and the price places it within the reach of everybody. This preparation should prove of great utility in the treatment of hypothyroidism.

MEDICAL PROGRESS IN MALAYA.

KING EDWARD VII COLLEGE OF MEDICINE AT SINGAPORE. THE annual meeting in February, at Singapore, of the Malaya Branch of the British Medical Association was of special interest since it was held in the new King Edward VII College of Medicine, which was formally opened by the Governor, Sir Laurence Guillemard, during the proceedings. As we mentioned on December 1st, 1923 (p. 1060), the foundation stone of the new college was laid during the fifth congress of the Far Eastern Association of Tropical Medicine in Singapore, in September, 1923. The old college was founded in 1905, and in 1916 its diploma was recognized by the General Medical Council as a registrable qualification.

After the ceremony of opening the college, the principal, Dr. G. H. K. Macalister, read a message of cordial congratulation from Sir Humphry Rolleston, and recounted the ideals of medical training and research which would enable the college to become a great asset to the whole of Malava. Sir Laurence Guillemard described the origin of the college, which, though a Government institution, had at its foundation received generous support from Chinese citizens; among its benefactors also were the King Edward VII Memorial Fund Committee and the Rockefeller Foundation. During the previous month the college had received visitors from far distant lands, including Brazil, Gibraltar, New York, Manchuria, Sydney, and Tokyo. The establishment in Singapore of the Eastern Bureau of the Health Section of the League of Nations would provide a great incentive to the study of hygiene in the college. The Governor pointed out how visitors to Singapore on entering the harbour would see a group of commanding buildings, at the heart of which were the classic columns of the College of Medicine. Singapore contained no other example of the pure school of classical architecture, and the choice of design was appropriate in that it symbolized the strength of the bond between modern medicine and the ancient philosophy of Athens, giving expression to the reverence paid to the endowment of wisdom handed down through the ages.

The Governor then presented the three first honorary diplomas of the college to three past presidents of the Malaya Branch: Sir David Galloway, who for forty years had been prominent in public health work and the municipal government of Singapore; Dr. Lim Boon Keng, who was for many years lecturer on materia medica and therapeutics in the college, and became in 1921 president of the Amoy University; and Sir Malcolm Watson, a medical officer of the Federated Malay States, who was renowned throughout the world for his work in the prevention of malaria.

Dr. A. L. Hoops, the president of the college council, and of the Malaya Branch for the current year, thanked the Governor and Lady Guillemard for their attendance, and explained how Chinese support had made possible the foundation of the college on its present scale. The professorship of physiology was founded mainly by Chinese subscribers in memory of King Edward VII, and the

building for the anatomy department was presented by a Chinese benefactor. There were now nine whole-time professors paid entirely by the college; those who were clinicians had charge of their respective specialties in the Government hospitals. In addition to the whole-time staff there were fifteen part-time lecturers. The medical course occupied six years, and the licentiates were free to practise throughout the British Empire.

Annual Meeting of the Malaya Branch.

At the annual meeting of the Malaya Branch, Dr. A. L. Hoops, principal civil medical officer for the Straits Settlements, was elected president, and Dr. J. W. Scharff honorary secretary. The retiring president, Dr. A. R. Wellington, described the activities of the Branch during the past year, Sir David Galloway delivered an address on anomalies in the course of congenital syphilis in Chinese, Dr. A. Neave Kingsbury read a paper on the prophylaxis of measles, Dr. M. J. Rattray dealt with notification of venereal diseases in males, with reference to co-ordinating treatment in different ports, and Mr. A. Dickson Wright read a paper on lymphuria. A visit was paid to the new Singapore General Hospital, where clinical demonstrations were given. Surgeon-Commander D. H. C. Niven arranged a microscopic demonstration of culicine mosquitos and their larvae found on Singapore island. An excursion was made to Gunong Pulai, where Dr. Hunter gave an account of the successful drainage work that had been undertaken to combat malaria among the labour force. The social part of the programme included the competition for the Watson golf cup, which was won by Dr. Hunter, and the annual dinner and dance.

The Origin of Western Mcdicine in Japan.

Dr. A. L. Hoops, in his presidential address to the Malaya Branch, described the progress of Western medicine in Japan since it had been introduced in 1549 by Luis Almeida of the company of Francis Xavier, who established charity institutions for the care of lepers, orphans, and the indigent sick. He was followed by Portuguese priests, who introduced medicinal plants and taught medicine, but later in the century severe restrictions against Christianity were imposed and many Portuguese and native medical practitioners were put to geath. The Japanese, however, kept the lamp of medical science burning, and at the beginning of the seventeenth century the Dutch obtained a concession in Japan, the medical department of which enabled Western surgery to be learnt by the Japanese. Dr. Hoops mentioned that the book of Ambroise Paré had been translated into Japanese early in the eighteenth century, and that the first necropsy was performed in 1777. Up to that date it had been believed that the viscera of the European barbarians were trans-posed, and that only those of the Japanese and Chinese were arranged normally. The foundation of a school of Dutch learning followed at Narutaki in 1825; by it various Western instruments, such as the clinical thermometer and stethoscope, were introduced. In 1857 the first permanent medical school was founded in Tokyo; it was the precursor of the Medical Faculty of the Imperial University. English medical science had played only a minor part in Japan up to the middle of the nineteenth century, but in 1867 a British physician, Willis, was appointed instructor in the Tokyo Medical College and director of the hospital. He was replaced by German teachers in 1871, but continued to teach in Satsuma. Japan quickly acquired a knowledge of Western medical science, and since 1900 all the teaching posts in medical schools had been filled by Japanese. There were now twenty-seven medical schools in Japan, of which eighteen were of University standing; two selfables were for women alone. Dr. Hoops gave a detailed account of modern laboratory research in Japan, with especial reference to the work of Kitasato and Shiga. The investigation of nutritional problems had now been made an independent branch of medical science, and a Government Institute had been established in 1920 for research into foodstuffs and a scientific study of nutrition. Dr. Hoops concluded with an account of the present hospital system in Japan, and of the general sanitary administration; including preventive work.