person, which may be either on the one hand greatly exaggerated, or on the other hand greatly diminished; more briefly it may be described as an unusual physiological personal equation." Idiosyncrasy may be held to embrace both diathesis and constitution, but the author of this informing book would limit diathesis to a condition favouring the onset of disease, whereas idiosyncrasy is an abnormal reaction not necessarily disposing to disease. Within the definition of "constitution" he would bring the inborn errors of metabolism, so named by Sir Archibald Garrod; we are inclined to think that he is right, and even disposed to suggest that he has not quite attached sufficient importance to these inborn conditions.

One section of the book deals with asthma; it contains a comprehensive survey beginning with Sir John Floyer (1649-1734), and coming down to the latest views of Hurst and Storm van Leeuwen. The same subject is dealt with in HURST'S own contribution to the series entitled *The Constitutional Factor in Disease*, which is a revision of the address published in our columns in May, 1927. He, it may be remembered, lays stress on the influence of heredity, and it is perhaps on this account that he defines asthma as "a condition in which that part of the vagal nucleus which controls the motor and secretory activity of the bronchi is abnormally sensitive to chemical, reflex, and psychical stimuli."

NOTES ON BOOKS.

Mental Handicaps in Art,[7] by Dr. T. B. HYSLOP, the author also of *Mental Handicaps in Golf*, which was reviewed in our issue of June 4th, 1927 (p. 1025), is introduced by a foreword from Professor ARTHUR THOMSON of Oxford, who, with the authority of a professor also at the Royal Academy of Arts, sternly rebukes the modern fashions of perverted art and the representation of the unfit. Dr. Hyslop also expresses anxiety about a tendency to degeneracy in present-day art, remarking that one of the great mental handicaps in some schools of art is a failure to perceive the illogical nature of their tenets, and that since the war vitiation of taste in art has proceeded apace, cumulative traces of primitives, classicists, romanticists, naturalists, impressionists, post-impressionists, and decadents having contributed respectively either to its growth or decay. The five chapters of this attractive little volume deal with the aims and objects of art, industry and art, the artistic faculty, disease in art, and the influences of toxins on mind and body. Dr. Hyslop, who by his artistic abilities is specially fitted to write on these subjects, points out that while normal functional powers are essential for a healthy artistic faculty, abnormality is not necessarily productive of bodily disease or bad art, and may lead to something out of the beaten track or a work of genius. The artistic efforts of mental patients are not always degenerate—in fact, the artistic merit of a paranoiac may be great. But he concludes by insisting on the importance of mental and physical health, so that *mens sana in corpore sano* should be the motto of every artist.

Common Procedures in the Practice of Pediatrics,[8] by Dr. ALAN BROWN and Dr. F. F. TISDALL, includes a curious assortment of subjects, and its contents are indicated by the subtitle —"a detailed description of diagnostic, therapeutic, and dietetic methods employed at the Hospital for Sick Children, Toronto." There is a short account of physical examination, and two chapters on the diet and general control of infants and young children, which, although not complete, deal with the more important matters both in their general principles and in their practical details; the remaining chapters are devoted to the exposition of a long series of diagnostic and therapeutic procedures, both clinical and laboratory. A useful section on the diagnosis of certain conditions that frequently give difficulty is interpolated. The authors themselves make it clear that the book is not a complete account of the comprehensive subject of pediatrics. But it is a very useful book, for it is written from experience, and it deals with a miscellaneous group of subjects which are either omitted, or dealt with inadequately, in the ordinary textbooks.

[7] *Mental Handicaps in Art.* By Theo. B. Hyslop, M.D., C.M., etc. With a foreword by Arthur Thomson, M.B., F.R.C.S., LL.D., D.C.L. Mental Handicap Series. London: Baillière, Tindall and Cox. 1927. (Fcap. 8vo, pp. xxxiii + 98. 3s. 6d. net.)

[8] *Common Procedures in the Practice of Pediatrics.* By Alan Brown, M.B.Tor., and Frederick F. Tisdall, M.D.Tor., M.R.C.S.Eng., L.R.C.P.Lond. Toronto: McClelland and Stewart, Ltd. 1927. (Med. 8vo, pp. x + 260. 4 dollars.)

The third quarterly number of this year's *Annals of Medical History*[9] begins with an oration delivered at the College of Physicians of Philadelphia by Dr. Astley Paston Cooper Ashhurst on "The centenary of Lister: a tale of sepsis and antisepsis," which is accompanied by the pleasing portrait of Lister as President of the Royal Society. Robert Hooke, one of the originators of the Royal Society and for many years its curator, is shown by Dr. W. S. Middleton to have been a man much in advance of his time, for he made many attempts to fly, was an early microscopist, and made experiments on telephony. Dr. A. H. Barkley tells us that Dr. Joseph Buchanan (1785-1829) was an inventor as well as a medical man; he designed an economical steam engine with spiral capillary tubes, and he also attempted to construct an airship. On the cover of this number is the portrait of Alexander Monro secundus, who, with his father and son, is discussed by Dr. S. William Simon; their tenures as professors of anatomy at Edinburgh covered the period 1719 to 1859. The second Monro, the ablest of the three, among other notable achievements invented the original stomach pump. His son was verbose, and it is stated that his editing of his father's essay and heads of lectures detracted considerably from their value. Dr. O. E. Denney of the U.S. Marine Hospital No. 66 (National Leprosarium) contributes an "Inaugurate medical debate on Elephantiasis or Lepra Arabum," translated by Chaplain Benedict Stretter from the original Latin and Greek of Benjamin Niesius, who defended this thesis in July, 1673, at Strasbourg. It closes with a eulogy to William Niesius, also a physician, but of him, as of the author, no further information is forthcoming. In the twenty-first instalment of palaeo-pathological studies Dr. Roy L. Moodie, in a generously illustrated article occupying thirty pages, describes the head injuries among the pre-Columbian Peruvians, which led to many of the trephining operations.

A second edition has appeared of Dr. D. C. MUTHU'S book on *Pulmonary Tuberculosis: its Etiology and Treatment*;[10] we reviewed the first on October 28th, 1922 (p. 805). In the new volume the original scheme and the philosophic outlook are retained. Although in many respects the orthodox teaching as regards etiology is rejected, yet the author's experience in treatment and his skill in setting out his case render a provocacative book well worthy of study. It is only to be regretted that too many of the recommendations for after-care involve a return to a less artificial form of life than is at present possible for the majority of tuberculous patients, who are forced by financial considerations to live in crowded communities.

Smith's Medical Visiting Lists for 1928 (Nos. 3 and 4) are handy little volumes,[11] with ruled pages for visits, for obstetric and vaccination engagements, addresses of patients and nurses, and cash memoranda. The visiting list (No. 3) has space for seventy-five patients each week, with a weekly journal attached. It costs 7s. 6d., and can be obtained from Messrs. Hazell, Watson and Viney, printers and binders, 160, Shaftesbury Avenue, W.C.2.

[9] *Annals of Medical History.* Vol. ix, No. 3. Edited by Francis R. Packard, M.D. New York: Paul B. Hoeber, Inc.; London: Baillière, Tindall and Cox. 1927. (8¾ × 12¼, pp. 205-314; illustrated. Subscriptions in Great Britain, £2 2s. per volume of four numbers.)

[10] *Pulmonary Tuberculosis: its Etiology and Treatment.* By David C. Muthu, M.D., M.R.C.S., L.R.C.P. Second edition, enlarged. London: Baillière, Tindall and Cox. 1927. (Demy 8vo, pp. cxxi + 381; 28 figures. 12s. 6d. net.)

[11] *Smith's Physicians' and Surgeons' Visiting List, Diary, Almanack, and Book of Engagements for 1928.* Eighty-second year. London: Hazell, Watson, and Viney, Ltd. (No. 3, cloth, 7s. 6d.; leather, 10s. 6d. No. 4, cloth, 10s.; leather, 12s.)

PREPARATIONS AND APPLIANCES.

"METALIX" X-RAY TUBE.

ONE of the notable pieces of apparatus shown at the recent exhibition in connexion with the inaugural meetings of the Röntgen Society and the British Institute of Radiology was the "Metalix" *x*-ray tube introduced by Phillips Lamps, Limited, of Charing Cross Road, London. There have been many changes in *x*-ray tube construction since the first models—weird-looking enough now, as seen in the collection at South Kensington—thirty years ago, but each tube has obviously evolved from its predecessor, whereas the "Metalix" tube is such a radical departure that at first sight one hardly supposes it to be an *x*-ray tube at all, partly because of its extremely small size and non-bulbular shape, and also because the rays are generated within a metal cylinder. The Philips "Metalix" tube is constructed to meet a variety of working conditions, but two types warrant special attention, one a radiator-cooled 90 ma. tube for radiography and screening, and the other a special tube for deep therapy. In the radiographic type it is claimed by the makers that the high load which the tube is made to stand is not at the expense of fine focus, and the tube is indeed provided with a "line" focus, the optical properties of which are well known. It is claimed for all these tubes that they embody their own protection.