

for, according to the editor's reasoning, the flush should be universal in that instance. Indeed, we are at a loss to conceive how the external manifestation of an emotion of the mind, in which the organs of the sympathies are more or less engaged, can be attributed to a mere local cause, and regarded in the same light as a mechanical effect produced by heat or friction.

Although the editor here denies that the heart has anything to do with the act of blushing, he states, nevertheless, in the preceding page, that "the motion of the blood in the capillaries is entirely dependant on the heart's action"—an opinion long since established by Müller. These statements evidently clash with one another, and by no means tend to clear up this interesting point of physiology. They are, however, of negative value in showing that the red colour of the cheek from blushing is *not* the result of a local cause—the reverse of what the editor wishes to prove.

The remainder of the fourth chapter is occupied with some useful observations on structural pathology, the nervous system in health and disease, and on the influence of the mind upon the body.

In Chapter V., by far the best in the volume, we have an analytical examination of the principal symptoms and signs of disease. This chapter commences with a few brief remarks on the blood, more especially on the value of the cupped and buffed appearance of that fluid as diagnostic of inflammation. The editor inculcates the necessity of being cautious in receiving this condition of the blood as a sign of inflammatory action. It is liable to be influenced by the slightest causes, and is by no means an infallible test. It is observed even in the blood of chlorotic girls. The mere presence of the buffy coat, says Dr. G., is not an indication of the existence of inflammatory action; all that it indicates is, that there is an alteration in the relative quantities of the fibrin and the red globules. The fact that the buffy coat may occur in diseases not characterised by acute inflammation—lead colic, bronchitis, albuminaria, &c.—should put us on our guard against placing too much reliance on the phenomenon as a sign of pre-existing inflammation sufficiently severe to justify the further abstraction of blood.

The next subject which engages our attention is the urine in its healthy and diseased conditions. The editor has here furnished us with an excellent *resumé* of the principal facts bearing upon this important branch of pathology. A few brief directions, as to the method of ascertaining the specific gravity of the urine, would have made it complete.

An "examination" of the abdomen and digestive organs follows that of the blood and urine, in which we find three useful diagrams, showing the anterior, posterior, and lateral regions of that cavity. And finally, this chapter concludes with an exploration of the chest, wherein the organs of respiration and of circulation are severally considered. It would be impossible to enter into this section as fully as it deserves in the small space allotted to us, but we can confidently recommend it to the attention of the student and junior practitioner as the best epitome of the kind in the English language.

ROYAL MEDICAL SOCIETY OF VIENNA.

February 15.

MEMBRANOUS INFLAMMATION OF THE FAUCES.

Dr. Haller drew the attention of the society to inflammatory affections, partaking of the nature of croup, which had been so very prevalent since last September. The characteristic of these inflammations, which extended over the fauces, and often into the oesophagus, was an exudation of pseudo-membrane exactly like that which occurs in croup; the disease lasted from three to four weeks, and the treatment from which he derived most benefit was the internal and external use of muriatic acid.

Dr. Mojsisovics considered true diphtheritis as a rare disease, but a dangerous one; he related a case, however, which was cured in three days by the administration of ice-cold drinks, and recommended a further trial of the method. Several members spoke highly of the good effects of cauterisation in affections of this kind. A discussion then followed on the propriety of using cold in the treatment of acute rheumatism.

PROVINCIAL MEDICAL AND SURGICAL ASSOCIATION.

EASTERN BRANCH.

A General Meeting of the Eastern Branch of the Provincial Association was held at Ipswich, on Friday the 17th instant. The following gentlemen were present at the meeting:—

Dr. Baird, Mr. Bartlett, Dr. Beck, of Ipswich; Mr. Bellman, Earl Soham; Mr. Bree, Stowmarket; Mr. Bullen, Ipswich; Dr. Chevalier, Aspall; Dr. Clarke; Mr. Crosse, Norwich; Dr. Durrant, Ipswich; Mr. Ebden, Haughley; Mr. Growse, Bildestone; Mr. Hammond, Mr. H. Hammond, Ipswich; Mr. Jones, Woodbridge; Dr. Kirkman, Melton; Mr. Martin, Holbrook; Mr. Muriel, Wickham Market; Mr. Pennington, Needham; Dr. Ranking, Bury St. Edmunds; Mr. Rodick, Halstead; Mr. Sampson, Mr. Sanderson, Mr. Walter Scott, Ipswich; Mr. Tomkins, Witham; Mr. Welton, Woodbridge; Mr. Wilkin, Walton.

Edward Beck, M.D., Cantab, having been called to the chair, opened the business by a lengthened and able address, of which the following is but a brief abstract:—

"We are met, Gentlemen (said the president), on this occasion, to further the objects for which the association was formed—objects familiar to you from the published Reports and Transactions which regularly pass through your hands. It must be gratifying to every member, but particularly so to those who joined it early, to see the steady progress it has made in numbers, weight, and respectability; that it will exert an increasing influence is very apparent, and the most watchful care should be taken to ensure that such influence is directed to really valuable and praiseworthy ends." Dr. B. then alluded favourably to the weekly Journal "circulated widely, and, it may be said, gratuitously amongst the members—a valuable acquisition—calculated to become a powerful aid