

to the astragalus, the cartilages over the scaphoid, tibia, and fibula were removed. The wound was packed with sublimate gauze, which was removed on the second day. A month afterwards the patient was sent home with the foot in plaster. The tendons divided by the transverse incision were not sutured; the ends becoming adherent to the scar.—Mr. CHAPMAN showed a specimen of Tuberculous Kidney from a severe case of Lupus. The patient, a woman, aged 22, had suffered from extensive lupus of the face, arms, and body since childhood; scraping of the lupus under an anæsthetic had several times been done. Slight hæmaturia was present during the last year of life. *Post mortem*, the left kidney was found to be full of cheesy material, and there were scattered tubercles in the lungs. The case was discussed by Drs. HIME, HONEYBOURNE, HORROCKS, CAMPBELL, APPELYARD, WILMOT, and BRONNER; and Mr. CHAPMAN replied.—Dr. SHIACH showed (1) for Dr. RABAGLIATI, a Fibroid Tumour of the Uterus which had been recently removed by abdominal hysterectomy. The patient died on the third day. (2) For Mr. ROBERTS, a large Pyosalpinx. Patient made a good recovery.—Mr. APPELYARD read notes on (1) a case in which he had removed a Fibroid Tumour of the Uterus, the patient making an excellent recovery. The tumour weighed 14 lbs. 11 oz. (2) A case of Villous Tumour of the Bladder. The patient was a lad, aged 19, who for three years had occasional attacks of hæmaturia. Six months ago he had frequency of micturition, albuminuria, incontinence of urine at night, and occasional dribbling during the day. The bladder was sounded under an anæsthetic, and afterwards a small papillary growth was found in the urine. On December 5th, 1895, suprapubic cystotomy was performed, and a small papillary growth was found, ligatured, and removed. The wound was drained and the patient made an excellent recovery. Mr. HORROCKS, Dr. KITCHIN, and Dr. HONEYBOURNE discussed the case.—Dr. CAMPBELL showed the Lungs taken from a case of Acute Tuberculosis.

REVIEWS.

THE MEDICAL DIGEST OR BUSY PRACTITIONERS' VADE-MECUM: APPENDIX, including the Years 1891 to 1894, and to August, 1895. By RICHARD NEALE, M.D.Lond. London: Ledger, Smith, and Co. 1895. (Cr. 8vo, pp. 230. 10s. 6d.)

The last edition of the *Medical Digest* was brought down to 1890. Dr. NEALE has now issued an *Appendix*, containing references from that time down to August last. He tells us that the vast amount of fresh material accumulated during the last few years appeared to justify the early appearance of the *Appendix*, and adds that he has been fortified in the opinion by numerous requests for its publication.

We are glad to hear of this evidence that the value of the *Digest* to practitioners is increasingly appreciated. There can be no doubt that, properly used, the work may be of the very greatest assistance in the everyday work of the general practitioner. Its compilation was, in fact, commenced by its author with the object of supplying his own needs as a general practitioner. It will probably be admitted by every medical man that he has a tendency, which perhaps grows with years, to fall into routine in his treatment. In nine cases out of ten, perhaps, the routine method answers well, but in the tenth it fails. It is under such circumstances that Dr. Neale comes to our rescue; a reference to the *Digest* will seldom, or never, fail to give a hint upon which to act. Suggestions which have been made for treatment, drugs which have been employed with success are mentioned briefly, but commonly the facts given are sufficient to enable the treatment to be applied without referring to the original authority, though this is given in every case.

Of the value of the *Digest* as a work of reference there can be no two opinions. Very rarely shall we fail to find at least a clue to information as to points in clinical medicine or therapeutics of which we may be in search; often we shall find a reference to a periodical publication containing a paper in which the subject has been discussed fully. In this appendix references are added from *Clinical Sketches*, and papers specially worthy of attention are marked with an asterisk.

The *Appendix* is a continuation of the *Digest* on the original lines, and with the original system of classifications. The sections in the appendix dealing with subjects already treated in the original volume bear the same numbers, so that a single consultation of the index of the *Digest* gives the reference both to the original volume and to the *Appendix*. The index of the latter contains entries only of those subjects which did not find a place in the index to the edition of 1890; nevertheless, it occupies 19 pages in double columns.

We trust that Dr. Neale will receive in this laborious enterprise the support which he has well earned. The work is necessarily one which it is costly to produce; we are informed, however, that the whole work, including the *Appendix* and containing references ranging from 1840 to August, 1895, will be supplied post free for 18s. 6d.

HISTORY OF THE CHOLERA CONTROVERSY, WITH DIRECTIONS FOR THE TREATMENT OF THE DISEASE. By SIR GEORGE JOHNSON, M.D., F.R.S., etc. London: J. and A. Churchill. 1896. (Demy 8vo, pp. 78. 3s.)

This is a very refreshing little book. In it the veteran author fights over again the old fights of his youth with undiminished ardour and with no whit less of his old dialectical skill and his firm and lucid grasp of principles. Indeed, so masterly is his advocacy that at times we are almost disposed to fear that Sir George is too clever for his antagonists, and that he might win victories by his dialectical skill rather than upon the merits. Far be it from us, however, to hint that such is the case on the present occasion.

The impression we form, rightly or wrongly, on reading this summary of the author's opinions and experience of cholera, is that the author's opinions are set forth with no less vigour and precision but with more moderation than on previous occasions. This impression of ours may well be due, however, to the exaggerations of his opponents rather than to any lack of moderation in his earlier essays. However this may be, the advice of Sir GEORGE JOHNSON, as set forth in this volume, seems to be discreet enough; the clinical experience of unprejudiced observers alone can settle the therapeutical part of the controversy.

From those whose lives are spent in the conflict with cholera we hear that "Sir George Johnson's castor-oil treatment of cholera" is found to be mischievous. Now as we read the present essay the author urges much discrimination in the practice of his method. He does not, as generally supposed, persist with strong purgatives, but, as a rule, endeavours to clear the bowel of the perilous stuff which it contains by one dose of castor oil, and that a mild one. After he is satisfied that his immediate purpose is attained, he not only holds his hand, but uses opiates also, which he fully admits to be a valuable means of soothing the patient. We must say that in our opinion the author makes out a strong case against bottling up the discharges in the intestine; in his own words, "do not give the opiate until the morbid poison and its products have for the most part escaped." The contrary opinion is based on the fear that dehydration of the blood rather than the circulating toxins may lead to death; in other words, that a man does not die directly of the poison, but indirectly of its dehydrating effects on the blood. This position Sir George Johnson is bound to attack, and attack it he does, and in our opinion not without success. The rapid deaths in those cases in which time for dehydration has not elapsed are a strong argument in his favour. Even the strongest of his antagonists now admit that to treat cases of retained discharges with opiates is a dangerous and even fatal error.

To turn to pathology Sir George Johnson has been fully justified by later observers in his statement that the shedding of the epithelium of the intestine is a *post-mortem* phenomenon; he might have added that in examination of the dejecta during life there is a remarkable absence of shed epithelium.

An essential part of the author's hypothesis is, as we need not say, that he lays far less stress upon the anhydraemia than do other physicians. For him the dryness of the lungs, for instance, is no direct consequence of dehydration, but of a contraction of the pulmonary arterioles under the morbid

stimulation of the toxin; again, as a further consequence, the tarry blood seen on venesection is, in his view, not due to dehydration but to pulmonary arrest. Whether some dehydration with very low blood pressure may be an equally good explanation, we leave to pathologists to decide. The secretion of the intestinal glands is enormously increased, hence the specific gravity of the blood plasma must rise; let us suppose that opium will modify this excessive secretion at the cost of retaining the toxins in the body, which of two evils are we, as practical men, to choose. Sir George Johnson will certainly give an answer theoretically opposite to his antagonists; but at the bedside, perhaps, they would treat the particular case in a similar manner. It must be admitted that his antagonists have made long steps in his direction. All careful men seem to have given up large opiates in the more rapid cases. On the other hand, we suspect that the author unduly neglects dehydration. If his treatment increases the diarrhoea beyond the needful relief of the body it must increase that exhaustion which all diarrhoea as such tends to induce. Cramp and comatose symptoms occur in extreme cases of diabetes insipidus and other processes of simple dehydration as well as in cholera.

The main practical difference seems to lie rather in the treatment of the diarrhoea prevalent in times of cholera. The current teaching, based, it is said, on successful practice is in favour of arresting this diarrhoea at once with such remedies as chalk and opium. The author would no doubt oppose this practice with all his might. In the meantime there is no shorter road to truth than the lucid and penetrating reasoning of such treatises as the present. An excellent point is made by the author in his reference to Koch's method of giving effect to cholera inoculations in otherwise resistant animals by intraperitoneal injections of opium. Sir George Johnson tells us that "the publication of his views led to such an outbreak of censure and opposition as probably no other member of the profession has ever been assailed with;" and we are bound to add that some quotations with which he supports this grievous statement seem to bear out his allegation. To say the very least of the author's views they were formed and published in the pure love of truth, and, as it then appeared, in direct opposition to his own worldly interests. There is something pathetic in the thought that the venerable author has had to wait so many years in order to find his opinions received with respect, and even with admiration; whether with general acceptance or not. As to this last, even if the author do not see his views generally accepted in his own lifetime, at any rate he finds himself able still to urge them with no failing powers, he knows that they have now a respectful welcome, and that, so far as they are true, they will now prevail; more he does not desire.

TEXTBOOK OF OPERATIVE SURGERY. By Dr. THEODOH KOCHER, Professor of Surgery and Director of Surgical Clinic in the University of Berne. Translated by H. J. STILES, M.B. London: Adam and Chas. Black. 1895. (Roy. 8vo, pp. 322. 20s.)

THIS volume is essentially a record of the author's personal experience and of his own methods of operation, and hence any criticism of such methods must give place to a simple record of those points in which the author's practice differs from that of English surgeons.

Thus we notice that in the chapter devoted to the consideration of the direction in which skin incisions are most profitably made, Dr. KOCHER adheres to the results of Langer's investigations, according to which this direction is determined by the course of the planes of natural cleavage. On this principle a transverse curved incision would have to be made in the neck in the operation of thyroidectomy, this procedure, according to the author, avoiding all disfigurement, and leaving an almost imperceptible scar.

In describing a method for ascertaining the relations of the surface of the brain to that of the skull, the author employs an instrument made by Schenk of Berne. It consists of two flexible strips of steel, which can be fitted on to any head by means of an elastic band carried round its horizontal circumference. The principle on which it works is that of percentage measurements, introduced by Dr. Müller.

In the chapters on intestinal arastomosis no reference is

made to the various mechanical helps which have lately come into prominence. The author prefers to rely on the simpler, if more difficult, methods of simple suture.

The book is profusely illustrated, and every praise is due to Mr. STILES for his careful and accurate translation.

INJURIES AND DISEASES OF THE GENITAL AND URINARY ORGANS. By HENRY MORRIS, M.A., M.B.Lond., F.R.C.S., Surgeon to and Lecturer on Surgery at the Middlesex Hospital; Member of the Council and of the Court of Examiners of the Royal College of Surgeons, England; Examiner in Surgery in the University of London. London, Paris, and Melbourne: Cassell and Company (Limited). 1895. (Demy 8vo, pp. 494; 97 illustrations. 21s.)

As Mr. MORRIS has undertaken to write a series of articles on the surgery of the genital and lower urinary organs, in an important work now in course of publication, it is difficult to understand why he should have added to the number of existing monographs on these subjects. Those, however, who select this from the many excellent manuals on the diseases here discussed will find, as might be expected from the author of the original and well-known work on the surgical diseases of the kidney, much sound teaching and useful information. Mr. Morris has paid much attention to the subjects of his recent work, and has carefully revised and added to the pages in their original form. He has certainly made it thoroughly representative of modern surgical opinion and practice. Many readers, however, will very probably regret that he has not carried out his intention to describe all that is requisite to be known about his subject. The busy practitioner will naturally expect to find in a special work devoted to a special series of subjects full details of treatment; and especially of operative procedures, by which alone so many of these diseases can be dealt with.

NOTES ON BOOKS.

The Student's Pocket Prescriber. By H. AUBREY HUSBAND, M.B. Third Edition. (Edinburgh: E. and S. Livingstone: 1895. 24mo. pp. 152. 1s. 6d.)—This little work is intended to remove the difficulties which students experience when commencing to prescribe. The 396 prescriptions it contains illustrate the treatment applicable to a great variety of cases. In the introduction, the various points which have to be considered in prescribing are given very clearly. A complete list of diseases, forming an index to the prescriptions, enables the student to select the line of treatment suitable to any particular case. The prescriptions, on the whole, are typical, well constructed, and are brought up to date so as to include combinations of the new drugs. The student prescriber will find this book a most useful companion, adapted to his wants, and a veritable pocketbook; it can be easily carried in the waistcoat pocket.

The Local Government Annual and Official Directory, 1896. Edited by S. EDGECUMBE-ROGERS. (London: The Local Government Journal Office. Cr. 8vo, pp. 270. 6d.)—This handy reference book has reached its eighth year of publication, and comprises information of a kind largely needed by those engaged in local government and sanitary administration. As regards London, all the various bodies concerned in the management of the metropolis from public health, Poor-law, educational, and domestic points of view find detailed mention, with lists of officers and the like. All the sanitary bodies in the provinces find similar mention; and there is incorporated a useful diary covering 56 pages.

PRESENTATIONS.—Dr. W. Owen Evans, of Buckley, near Chester, has been presented with a gold ring with suitable inscription by the members of the Buckley Branch of the St. John Ambulance Association, in recognition of his services to the class.—Dr. Barnfield Dayman, who has left the parish of Millbrook, has been presented by his friends and patients with a gold chain as a mark of their respect and esteem. Attached to the chain is a pendant which bears a suitable inscription.