

Reviews.

NEUROLOGY.

LESS than two years after the first edition of PURVES STEWART'S *Diagnosis of Nervous Diseases* was published a second edition was called for. That edition, published in 1908, appeared in 1910 in French and German translations, and now a third edition, into which a considerable amount of fresh material has been incorporated,¹ has been issued. These facts sufficiently attest the high value of the book and its deservedly wide acceptance. In our review of the last edition, published in April, 1910, we alluded to the author's masterly grip of facts and entire lucidity of expression. On this, therefore, no more need be said. The reader, however, may be reminded that the work is not intended to displace systematic treatises on nervous diseases, but is planned to supplement them. It deals exclusively with diagnosis, and therefore, after brief opening chapters on the anatomy and physiology of the nervous system and method of clinical case-taking, Dr. Stewart describes nervous disorders from the purely clinical point of view, devoting, for example, separate chapters to coma, fits, and other convulsive phenomena, aphasia, pain, inco-ordination, and so on. The advantages of this plan to the practical student of neurology, both as a guide to diagnosis and for reference in any particular case, are obvious. Needless to say, the work is throughout up to date, and includes the very latest refinements of neurological diagnosis. The whole work is profusely illustrated by diagrams, photographs, and coloured prints, whose excellence adds to the value of a book which is so practical and instructive that it should be in the hands of every practitioner and student of neurology.

During the last few years great interest has been taken in acute anterior poliomyelitis, or infantile paralysis, and much has been heard about the severe epidemics of this often fatal disease that have visited other countries—America, Scandinavia, Germany. At the present time London is placarded with public notices concerning its compulsory notification. Hence it is with some relief that one reads in Dr. F. E. BATTEN'S pamphlet, *Poliomyelitis in Relation to the Spread of Infection by Schools*,² that at present, at any rate, there is little to show that the infection of poliomyelitis is spread by schools. Little is really known about its spread, and Dr. Batten is careful to avoid saying that schools and institutions do not aid in its dissemination; the question, as he points out, is still *sub judice*. He advises that contacts should be quarantined for a fortnight, and that infected children should not return to school for at least a month, and only then if convalescence is complete and there is no discharge from the nose. He suggests that both contact cases and infected persons should be treated with urotropin, a drug that is known to delay and prevent infection experimentally.

OPHTHALMOLOGY.

ALL the ophthalmic pathologists who have used the first edition of Dr. SELIGMANN'S textbook of microscopical methods³ will welcome the second greatly enlarged edition. In the preface to the new edition the author points out how ophthalmologists have freely availed themselves of the wealth of new methods which modern histology has evolved, such as vital staining, the celloidin dry method, modern methods of staining fat, glycogen staining, and new stains for axis cylinders and nerve fibrillae. Processes used in blood examinations and in bacteriology have now to be considered, and in consequence it has been necessary to enlarge the volume. Methods of

less value are printed in small type, but it must be noted that in the present state of knowledge the use of a few methods no longer suffices even for a beginner. The specialist needs a large handbook, and Seligmann says that it has been his endeavour to supply his need. Until after using the book practically in the histological laboratory it is difficult to give a judicial verdict upon it, and we can only say here that those methods which we have looked up have been clearly described, and practical hints have been given to avoid the various causes of failure. The book is divided into a general and special part. The general includes instruction on removing the eye, orienting it; preparation of specimens of the bisected eye; fixing, hardening, section cutting, and staining. Nerve methods have a chapter to themselves, and, finally, a chapter is devoted to methods of demonstrating various tissues. Among them are methods for demonstrating karyokinesis, for showing the ultimate structure of protoplasm, elastic fibre staining, and, lastly, methods used to stain blood. The special portion treats of the cornea and sclera, the uveal tract, the retina, the optic nerve, the lens and the zonule of Zinn, the vitreous, and some other special subjects. A chapter on ophthalmo-bacteriology ends the book. Instructions are carefully given for injecting blood vessels. The book is not confined to the human eye; directions for examining other species are given, and the reader is told how best to decalcify the eyes of some fishes before they are hardened.

Refraction and Visual Acuity,⁴ by KENNETH SCOTT, is a new book on this subject. The subject is well treated, in a concise manner, and there are not too many mathematical formulae, which, though interesting to those capable of understanding them, are yet not appreciated by the majority of readers, who have neither the time nor inclination, nor even the requisite knowledge, to appreciate them. The book is eminently practical, and may be thoroughly recommended. There will be many whose practice differs from that recommended for working out a refraction, but no one way will satisfy all. The author lays special stress on the fitting of glasses, and the measurements of the patient's face by the surgeon, while elaborate details are given to enable the surgeon to verify the work of the optician. There is an excellent chapter on colour vision, in which the Edridge-Green theory is briefly given, and its bearing on the tests for colour blindness pointed out. It is characteristic of the book that the older and disproved theories of colour vision are not even mentioned. There are short chapters on squint, simulated blindness, and the inspection of school children. Part II consists of 45 pages, and is entirely devoted to the rules and regulations as to visual acuity required for the public services, and by all the principal steamship and railway companies in England, the Colonies, and in many foreign countries. This is of the utmost use, and the book would be well worth having were it for this alone. Finally, there is a useful appendix describing several instruments and other appliances for testing the eye. The book is one of the most practical we have seen for years, and is really quite different from many which are produced on this well-known subject, all cast very much in the same mould. This one we can thoroughly recommend to those who are in the habit of examining eyes, and especially those concerned in the examination of candidates for services where good eyesight is essential.

THE PRACTICAL APPLICATION OF THORACIC ANATOMY.

THE exact anatomy of the thorax and its contents is not studied, as a rule, with the attention that its importance would seem to warrant. To specialists such study is more or less essential, but many of them do not enter upon special lines of work until after their best opportunities for study are over, and hence the appearance of a detailed and well-illustrated account, written with the express object of applying exact anatomical knowledge to careful clinical observation, will be welcomed by all whose line of practice calls for more than superficial acquaintance with applied anatomy.

Such a work is now before us, originally planned as a

¹ *The Diagnosis of Nervous Diseases*. By Purves Stewart, M.A., M.D. Edin., F.R.C.P., Physician to Out-patients, Westminster Hospital; Joint-Lecturer on Medicine, Westminster; Physician, West End Hospital for Nervous Diseases, etc. Third edition, revised and enlarged. London: Edward Arnold. 1911. (Demy 8vo, pp. 485; figs. 222, plates 2. Price 15s. net.)

² *Poliomyelitis in Relation to the Spread of Infection by Schools*. By F. E. Batten, M.D. Issued by the Medical Officers of Schools Association. London: J. and A. Churchill. 1911. (Roy. 8vo, pp. 16. Price 1s. net.)

³ *Die mikroskopischen Untersuchungsmethoden des Auges*. Von S. Seligmann, Hamburg. Zweite Auflage. Berlin: S. Karger. 1911. (Sup. roy. 8vo, pp. 332. M. 8.)

⁴ *Refraction and Visual Acuity*. By Kenneth Scott, M.D., C.M., F.R.C.S.E. London: Rebman Limited. 1911. (Post 8vo, pp. 197. 6s. net.)

thesis, but subsequently expanded, by Dr. J. STUART DICKER of Belfast, and we can cordially endorse the good opinion of it expressed by the examining authorities, who awarded a gold medal to its author. Much has been written on the subject of thoracic anatomy in numberless textbooks, but in many directions it may be noted that they are not all in agreement. Especially is this the case with regard to the apical regions, and Dr. Dickey has done well to devote a good deal of study to this part of his subject, bearing as it does so essentially upon the proclivity of the apices to tuberculous disease. Clear description, illustrated by good drawings, most of which seem to be original, renders the mass of detail in his *Applied Anatomy of the Lungs and Pleural Membranes*⁵ intelligible and the arrangement under headings facilitates reference. The course of the lymphatic vessels and the relations of lymph glands are traced with admirable precision. Careful attention to many of the points demonstrated should serve to prove the inaccuracy of some of the supposed lines of infection that have from time to time been suggested. The relations of the cervical pleura, too, are very fully examined, many points familiar to the clinical physician being discussed and explained. In the second part of the work the anatomy of the thoracic walls and the relation of the viscera as seen in sections at various levels are very fully dealt with. Dr. Dickey has evidently spared no pains in his endeavour to give an exhaustive account, and has drawn upon the recognized work of many of his predecessors for support, though sometimes he finds ground for adverse criticism.

The use of skiascopy, and especially of the orthodiagraph, has thrown considerable light upon the excursions of the diaphragm, which are found to be considerably modified by many abnormal conditions, sometimes unsuspected in the course of routine physical examination. The pleura and its disturbance by varying degrees of inflammation or effusion obtains very careful consideration, and many useful hints are given for the avoidance of danger in tapping. The mediastinum is demonstrated by means of cross sections and close attention is given to the exact course and relation of the great tubes passing through it. Special interest attaches to the course of the upper air passages, open as they now are to inspection by the bronchoscope.

A short section near the end of the book deals with the question of the paths of the tuberculous infection to the apices. Five such paths are recognized and the relative liability of each to carry the bacillus is discussed, but no new ground is broken, as the subject has been fully examined by many previous writers.

For the work as a whole we have nothing but commendation. It should prove of real value to teachers of thoracic anatomy and of special interest to practitioners who have much to do with cardiac and pulmonary disease.

POVERTY AND RICHES.

MR. BINNIE DUNLOP, M.B., has written a pamphlet entitled *National Happiness under Individualism*,⁶ which, short as it is, has without doubt required more hard thinking than many a portly volume. He calls it an "explanation and solution of the poverty and riches problem." It is, at any rate, a contribution to the question well worthy of study. For Mr. Dunlop, as for not a few of his predecessors, poverty is essentially due to overpopulation, and therefore to understand poverty and its prevention it is, he holds, necessary to understand overpopulation and its prevention. To avoid either, and therefore both, the question to be answered is, he says, "Who are not to beget children?" According to Mr. Dunlop, the answer of the socialist is, "Those whom the State thinks least worthy," and of the individualist, "Those who cannot afford to maintain them properly." This he calls the individualist law of parental responsibility. For him "excessive families mean inability to save; want of savings means inability to protest effectively against low wages; low wages, again, mean further inability to save"; he sees in home maintenance of children "the last ditch"

for the retreating forces of individualists, and challenges them "to produce any other practicable policy for checking chronic poverty and its sequel socialism" than child emigration. We will not attempt to pick up Mr. Dunlop's glove, though it may seem that his solution is only a way of temporizing with the problem. As we are led to believe that Mr. Dunlop intends to devote himself to questions of this order, and as he is clearly competent to give valuable assistance in their elucidation, we will venture two criticisms from which we might otherwise have refrained. The one is that he should pay more attention to correctness of style and in particular weigh carefully any metaphorical expression before he allows it to pass; had he done so in preparing this pamphlet he would hardly have spoken of an "urgent line of demarcation." The other is that he should make a vow wholly to eschew for the next five years the use of italics. The psychology of italics we take to be this—an inexperienced writer in reading over his sentence feels that he has not sufficiently emphasized the point he wants to make. Instead of drawing the true conclusion, which is that his sentence is inefficient or ineffectively constructed, he evades the difficulty, the true solution of which might have taken half an hour, or half a day, or half a week, by a stroke of the pen, which costs half a second. But the abuse of italics—which Lord Beaconsfield called the last resort of the forcible feeble—distracts and finally wearies the reader.

MEDICAL MISSION WORK IN KASHMIR AND MOROCCO.

WE fear that the title, *Beyond the Pir Panjal*,⁷ which Dr. ERNEST NEVE has chosen for his handsome and well-illustrated volume on Kashmir will convey little to many readers in this country. The Pir Panjal is the mountain range separating the North of India from Kashmir, where Dr. Ernest Neve has been for a quarter of a century one of the medical missionaries of the Church Missionary Society. The first four-fifths of the volume are taken up with the Vale of Kashmir and contiguous valleys, the mountainous heights enclosing them, and that part of Western Tibet watered by the River Indus. A disproportionately brief account of the mission and its work concludes the volume. More than 90 per cent. of the people are Mohammedans, although there are 65,000 Brahmans. They have suffered much oppression, and one of their proverbs runs: "O God, save me from physicians and rulers." In their use of drastic purgatives, venesection, and starvation, the practice of the native doctors reminds one of the worst period of the Middle Ages. The present Maharajah is an enlightened ruler, and is assisted by British Residents representing the King-Emperor. The country with its wonderful valleys, its mountain peaks lost in perpetual snow; the people, their ignorance, superstition, disregard of sanitation, moral delinquencies, and curious customs—all are brought before the reader, although it must be confessed with some repetition and a detail at times verging on prolixity. Dr. Neve's narratives of his ascents of some of the mountains are set down with all a climber's enthusiasm. The mission school, the hospital, and the separate leper hospital are at Srinagar, a city with a population of over 126,000. The annual cost of each hospital bed is £10. The chief savings are effected on salaries, labour, provisions, and surgical dressings. Instead of expensive medicated wool, sterilized sawdust, costing one anna for 10 lb., applied in muslin bags, is used. The mission hospital has 150 beds, of which many are endowed, and the hospital is self-supporting in consequence. As many as a dozen cases of kangri cancer are in the wards at the same time. The kangri is a kind of brazier the people carry about filled with glowing embers to keep themselves warm. All their lives they burn themselves with these things, and the prolonged irritation is frequently followed by cancer. Last year 23,642 new out-patients attended, and 1,979 in-patients were admitted. As many as 400 patients are seen, and twelve major and forty minor operations are sometimes done in a day. Spiritual instruction goes hand in hand with medical attention. To those wishing to know more about one of the outposts of civilization, and of

⁵ *Applied Anatomy of the Lungs and Pleural Membranes*, with Especial Reference to the Apical Region of the Chest. By J. Stuart Dickey, M.D., B.Ch., Senior Demonstrator of Anatomy, Queen's University of Belfast. Belfast; Alexander Mayne and Boyd. 1911. (Sup. roy. 8vo, pp. 136, figs. 50. 5s. net.)

⁶ Published by the author at Brasted, Kent. (Price 3d.)

⁷ *Beyond the Pir Panjal: Life among the Mountains and Valleys of Kashmir*. By Ernest F. Neve, M.D., F.R.C.S. Edin. London and Leipzig: T. Fisher Unwin. 1912. (Medium 8vo, pp. 320, 2 maps and 58 full-page illustrations. 12s. 6d. net.)

the value of the missionary work in breaking down caste, leading to a better understanding between races with opposite ideals, and in spreading a knowledge, among other things, of sanitation, Dr. Neve's book can be cordially recommended.

In *Morocco After Twenty-five Years*,⁸ instead of long descriptions of scenery and places, Dr. ROBERT KERR describes the people. The result is an entertaining book, marked by the individuality of its author, who is a medical missionary with abounding faith in his calling. A considerable part is taken up with the affairs of the mission, but an exposition of the Moslem creed, as it does not add to common knowledge on the subject, seems superfluous.

But Dr. Kerr brings us face to face with the people. He is a keen observer and goes straight to the heart of things. The peculiarities of the people; their bravery, cowardice, and superstition; their marriage customs, duplicity, malingerer, and cruelty; the business acumen and intellectual sharpness of the better class, are shown in a manner instinct with vitality, and illustrated by some capital stories. Dr. Kerr's remarks on the incapacity and unfitness of some of the missionaries sent out are candid, and deserve to be read and pondered by intending missionaries. He sums up the political situation adversely to France, and has some hard things to say of Britain and the Consular service for neglect of the interests of British subjects. He bears strong testimony to the efficacy of vaccination, which, in the face of great opposition, he introduced into Morocco. Now he vaccinates from 1,300 to 1,400 annually, "saving thousands of young lives," and gaining, through vaccination alone, an entrance into every home. Dr. Kerr believes that when Morocco is opened up it will become a resort for those with chest complaints, as the climate, he considers, far surpasses that on the shores of the Mediterranean. In the North of Morocco, Europeans and natives have "exceptionally good health." Malaria, leprosy, small-pox, typhoid and typhus fevers, scabies, and phthisis are the prevalent diseases. He states that the Jews rarely suffer from phthisis; tuberculous animals are common, and are sold, when the Jewish slaughterer has pronounced them unfit food for the chosen race, to the Moslems.

With its excellent type and full-page illustrations, Dr. Kerr's book may be recommended to all interested in a country which of late has been much in the public eye, and is destined to come more into notice in the near future.

URINARY SURGERY.

To listen to one end of a telephonic conversation is, if not exasperating, frequently amusing. In reading M. CATHELIN's pamphlet on the comparative value of ureteral catheterism and division of the urine,⁹ we are at one moment amused by the sarcastic references to opponents, and at the next worried to know what arguments he replies to. We are not long left in doubt as to his opinion that the Luys segregator is a dangerous instrument, for, in a kind of preface, he narrates three published cases examined by this instrument in which operative procedure founded on information so supplied was followed by disaster. Nor are we left long in doubt that, in the author's opinion, the best apparatus for division or separation of the urines within the bladder is Cathelin's, and the best books to consult on the subject are Cathelin's, where the reader will find thirty-two different difficulties and dangers and objections to ureteral catheterism. Ureteral catheterism teaches nothing regarding the total quantity of a renal retention, for instance; and he regards its use as open to grave errors beyond our control. He maintains that no method is of high value which does not enable the surgeon to make comparison of the quantity of urea and chlorides excreted from each kidney, that other alterations in the urine are of less importance. At the same time, he thinks that urinary surgeons should accept the two following working propositions: (1) That disease of the upper urinary tracts demands complete

exploration of these tracts, employing every method and every particle of clinical evidence; and (2) that when one is certain of having to deal with a diseased kidney, and when that kidney cannot be discovered clinically, and when ureteral catheterization fails (as it will in tuberculous disease), then it is necessary to use an instrument for division or segregation of the urines. The author in the fifth letter gives short histories of 12 cases, in each of which catheterism failed after at least two attempts, and in all successful division of the urines was made. Of these 12, 8 were tuberculous, 1 hydronephrosis, 1 calculus, and 2 epithelioma, and in all the quantities of urea and chlorides were greatly diminished in the urine from the kidney found on operation to be diseased. In the attempts at ureteral catheterism of these cases the causes of failure were lessened vesical capacity, the impossibility of distinguishing the meatal orifice on account of vesical lesions, and the hitching of the tip of the catheter a short distance up the ureter. The author's conclusions as to the proper procedure to adopt are, on the one hand, to do unilateral ureteral catheterism at once "when we know and when we can," and on the other, "when we do not know," to make an endovesical division with his instrument in small bladders, and with Downes's instrument in large bladders. He thinks that in 50 per cent. of the cases ureteral catheterism will be employed—in 20 per cent. Cathelin's instrument, in 20 per cent. Downes's, in 5 per cent. no such exploration will be necessary, and in 5 per cent. nephrostomy will be urgently called for.

A couple of years ago we had the opportunity of reviewing Dr. O. RUMPEL's *Cystoscopy as Adjunct in Surgery*,¹⁰ and spoke highly of the plates, of their arrangement, and of the short notes on each picture. We have since then reviewed many such works, in English, French, and German, and can say confidently that this one is the best. We now have before us a translation by Dr. P. W. SHEDD, of New York. The fifty-nine pages of introduction seem to be a very literal translation. An example can easily be found: "They rise plastic from the deeper-lying, and therefore darker-appearing vesical wall, whose traces of trabeculae are still plainly visible." The whole is reminiscent of the translation of German legends which Mark Twain has immortalized in *A Tramp Abroad*. We might indeed be reading about "the heaven-aspiring, as it were, out of the stream rising rocks with their perpendicular, often projecting walls," which are mentioned in the legend of the Lorelei. This, however, does not matter much, as the picture is the thing in a cystoscopic atlas; in this work these reproductions have not lost in clearness or in colour when compared with the earlier ones. Therefore we can still recommend this book to anyone who wants such aid in the interpretation of what he sees down the cystoscope.

THE ANATOMY OF THE ABDOMEN.

In his work on *The Abdomen Proper*¹¹ Dr. W. C. MORTON enunciates at the outset a series of five principles as a fundamental basis of study, and applies them to the human body. It consists of two complementary portions, the plates and the text, and for the present is confined to a "normal abdomen." Should the reception accorded to it be sufficiently encouraging, however, the author may apply the principles to other parts of the body later on. With the principles themselves there will be general agreement, and in the plates and the text alike there is evidence of originality and a good deal of thought. The plates are twenty-eight in number, printed in colours, on fourteen loose sheets of specially prepared paper, for the purpose of transillumination. They are in reality outline drawings of the structures in the abdomen and its walls, and are constructed in such a manner that when superimposed and viewed as transparent objects, the relationships of organs and structures at different levels may be studied in con-

⁸ *Morocco After Twenty-five Years; a Description of the Country, its Laws and Customs and the European Situation.* By Dr. Robert Kerr. London: Murray and Evenden, Limited, 1912. (Med. 8vo, pp. 379; 2 maps, 44 illustrations. Price 10s 6d, net.)

⁹ *Six lettres sur la valeur comparée du cathétérisme urétral et la division des urines.* Par F. Cathelin. Paris, 1911. Printed for Private Circulation. (Roy. 8vo, pp. 43.)

¹⁰ *Cystoscopy as Adjunct in Surgery.* With an atlas of cystoscopic views and concomitant text, for Physicians and Students. By Staff Surgeon Dr. O. Rumpel, Lecturer in Surgery at the University of Berlin. Only authorized English translation, by P. W. Shedd, M.D., of New York. London: Rebman Limited, 1911. Demy 4to, pp. 137. 36 plates, with 85 illustrations in colour, and 22 figs. in the text.)

¹¹ *Principles of Anatomy: The Abdomen Proper.* Described and illustrated by text and plates. By W. C. Morton, M.A., M.D. Edin. London: Rebman Limited, 1911. (Med. 8vo, pp. 174. £2 2s. net complete, including a special frame for studying the plates by transillumination.)

siderable detail. The plates can be used in other ways as well. The idea is ingenious, and has been carefully carried out, and though we cannot see any likelihood of any general use being made of them in the dissecting-room, they may be found of service in the subsequent revision of work already done, and as a reference when access to a dissecting-room is impossible.

Though the text, too, illustrates the principles enunciated, we do not think that the author has succeeded in presenting his subject in a way likely to attract the average reader. Some of the changes in treatment and nomenclature, made, says the author, with "a definite aim at clearness, conciseness or ease in handling the facts," seem unnecessary, and in some cases even misleading. Of what assistance is the term "interfissural area of the liver" (quadrate lobe) to the student who has been taught the form of the generalized mammalian liver and is able to recognize the right lateral fissure in the human specimen when it is present? The statement, too, that "the testes themselves, like the ovaries, are covered not by peritoneum but by germ epithelium," is misleading as it stands, and needs amplifying to give the correct impression. Moreover, we cannot accept *in toto* the statement that "the small sac is not a diverticulum of the great sac," since that part of the small sac which lies behind the liver develops as a right-sided pocket from the great sac during the first month of development. Indeed, at one stage there are two such pockets—right and left—though the left one soon disappears. The general get-up of the book is unattractive, and the type of the contents pages seems unnecessarily prominent and varied.

THE "MEDICAL ANNUAL."

The editor of the *Medical Annual*¹² is once again to be congratulated on the production of a highly useful volume. Among its other virtues is that of keeping to the same arrangement as its predecessors, and thus not confusing those who have learnt to rely upon it as a reference work. In bulk it is slightly less portly than last year's volume, and the number of different contributors is also somewhat less, but the former point is a virtue rather than a defect, while almost without exception those placed in charge of the different branches and subdivisions of medicine and surgery bear already well known names. The writers of one or two of the articles dealing with subjects of a specialist kind are not resident in this country; this, again, is a possible advantage, since in some of the special departments of medicine feeling tends to run high. To an active participant in any fray strict impartiality and accuracy of focus must ever be difficult of attainment. A good many articles have a certain topical interest—that, for instance, in which Mr. Whipple Gadd sums up the outstanding features of the Insurance Act and indicates their general bearing on medical practitioners, pharmacists, and hospitals. It is very clearly written, but not all readers are likely to share his apparent belief that if the demands of the medical profession overtop the sums available, the Insurance Commissioners, *motu proprio*, could solve the difficulty by ordering an increase of contributions. Also timely is the well illustrated article in which Mr. Charles Leedham-Green endeavours to awaken a keener interest in regional anaesthesia, by showing in how many more circumstances it is utilizable than is commonly known. In the articles on ear disease evidence is supplied that what is described as "the conservative radical mastoid operation, first brought to general attention by Heath," has numerous advocates, especially in America and on the Continent. Corresponding evidence that aurists as a class are paying any considerable attention to the question of the best way of alleviating the condition of those who are admittedly incurably deaf is unfortunately lacking. Sea-water treatment is also considered, but not, as two years ago, at great length; this year, after a brief reference to the fact that the treatment has been exploited by the lay press, the writer continues as follows:

The supposed virtue of the sea water lies apparently in the fact that by addition of spring water it is rendered isotonic with human blood. Whether the particular combination of salts in sea water has any special value in cases of infantile diarrhoea is doubtful; certainly its use by some scientific observers has

not justified the extravagant claims made for it; any method of supplying fluid to an infant drained of water by severe diarrhoea has, as has been recognized for many years, a life-saving value in many cases, and subcutaneous administration has been practised for a long time for this purpose.

NOTES ON BOOKS.

THE advanced ambulance handbook, *First Aid to the Injured*,¹³ by Messrs. WARWICK and TUNSTALL, has now become a standard work on the subject, and the issue of its seventh edition (sixtieth thousand) within ten years is ample testimony to its utility. This new edition has been thoroughly revised, and the latest stretcher and wagon drill has been incorporated from the R.A.M.C. Training Manual, special drawings having been prepared from photographs. These illustrations of stretcher and wagon drill are a feature of the book.

In *District Nursing*¹⁴ is to be found an account by Miss MABEL JACQUES of this work as conducted in American cities, together with advice derived from her own experience as to the ends which should be kept in view by those who are nurses themselves or by those who wish to start district nursing associations. Though one gathers that work of this order is comparatively in its infancy in America, useful hints might no doubt be gathered from its pages by those similarly engaged in Great Britain.

The popularity in America of Dr. STEVENS's *Manual of the Practice of Medicine*¹⁵ is sufficiently evidenced by the number of editions which have appeared since its first publication in 1892. The ninth edition, like its predecessors, is intended to assist students in building up their knowledge by clinical observation and attendance at lectures. Used in this way it may be useful to British as well as American students, though one can hardly agree with the author that the saying, "half our knowledge we must snatch, not take," can rightly be applied to practical medicine.

An account of the important series of discussions held last year at Caxton Hall on the subject of poverty and its prevention has been published in a large volume entitled, *National Conference on the Prevention of Destitution*.¹⁶ The work was divided into six sections—namely, public health, education, unemployment, mental deficiency, legal, and financial sections. The views and suggestions set forth in the various papers and in the course of the discussions form a species of encyclopaedia of current ideas on the whole subject. The volume, therefore, has a certain degree of permanent interest, and may be found useful as a kind of reference book for some years to come.

Anyone who has ever had the smallest experience of nursing has probably felt the difficulty of catering successfully for sick people. More particularly is this the case with regard to convalescents, whose reawakening appetite must be skilfully flattered at the same time that a delicate digestion has to be taken into full account. Miss FLORENCE B. JACK's excellent *Cooking for Invalids in Home and Hospital*,¹⁷ of which a new and revised edition has recently appeared, should therefore prove of great assistance to all who may be called upon to exercise their tact and ingenuity in ordering meals for the sick-room. Miss Jack's recipes, which combine the threefold advantages of being light, nourishing, and economical, are also extremely practical; and they are given with a simplicity and conciseness that should enable the veriest tiro in invalid cooking to try her hand with some measure of success. A few specimen menus and some useful hints on the art of poultice-making help to complete this invaluable little work, which should find its way to a handy place on the bookshelves of every home.

¹³ *First Aid to the Injured and Sick*. An Advanced Ambulance Handbook. By Major F. J. Warwick, M.B., M.R.C.S., and Major A. C. Tunstall, M.D., F.R.C.S. Seventh edition. Bristol: John Wright and Sons. 1911. (Fcp. 8vo, pp. 260. 1s. net.)

¹⁴ *District Nursing*. By Mabel Jacques, with an introduction by John H. Pryor, M.D. New York: The Macmillan Company. 1911. (Cr. 8vo, pp. 176.)

¹⁵ *A Manual of the Practice of Medicine*. Prepared especially for students by A. Stevens, A.M., M.D., Lecturer on Medicine in the University of Pennsylvania. Ninth edition. Philadelphia and London: W. B. Saunders Company. 1911. (Post 8vo, pp. 573; 19 illustrations. 2.50 dols. net, or 12s. 6d. net.)

¹⁶ *National Conference on the Prevention of Destitution*. Proceedings of the Conference held May 30th and 31st and June 1st and 2nd, 1911. London: P. S. King and Son. 1911. (Roy. 8vo, pp. 766. 10s. 6d. net.)

¹⁷ *Cooking for Invalids in Home and Hospital*. By Florence B. Jack. A new edition, revised and enlarged. London and Edinburgh: T. C. and E. C. Jack. 1912. (Post 8vo, pp. 207. 2s. net.)

¹² *The Medical Annual*. Thirtieth Year—1912. Bristol: John Wright and Sons, Ltd. (Demy 8vo, pp. 734. Price 8s. 6d. net.)