

Herpes Labialis. Each attack was accompanied with migraine. —Mr. F. MARSH showed a boy, aged 13, with Dry Gangrene of the whole of the ring and little fingers, of the tips of the two other fingers and thumb, and of the skin over the thenar and hypothenar eminences of the left hand following injury to the arm. —Mr. EDWARD FREEB showed a case of Talipes, practically cured. —Mr. HASLAM showed a patient, aged 18, whose Wrist he excised for extensive Tuberculous Disease. He now had a hand that would be of some service to him.

“CONTRE-COUP.”

Professor ALLEN read a note on the mechanism of cerebral injuries by “contre-coup.” When the skull was struck forcibly at a particular region—say the occipital—the comparatively rigid cranium was driven, as a whole, away from the point of impact (forwards in this case); but the brain, owing to its softness, lagged behind, and tended to flatten itself against the cranial wall on the struck side (occipital). This might cause direct injury. But the cranial wall here supported the brain substance, and distributed the force of the blow over a wide area, rendering the injury less acute. The chief injury occurred on the opposite side (frontal), where the lagging brain tended to move away from the cranial wall and receive no support from it. At the centre of the unsupported surface there was a point from which the soft brain substance was tending to depart in all directions in the act of flattening itself. At this point of greatest strain the rupture would occur. After the first rupture waves of oscillation would occur, and these might increase the injury. If detachment of the dura mater could be caused by contre-coup, as some had affirmed, it should be the result of exhaust or suction at the moment when the brain receded from the inner surface of the cranium. This so-called contre-coup detachment of the dura mater was said to occur only in the squamous region, where the dura mater was not so strongly attached to the bone as in other regions.

SPECIMENS.

Specimens were shown by Dr. STANLEY (for Dr. SIMON) Dr. KAUFFMANN, Mr. HEATON, and Dr. CODD (for Dr. MALET)

REVIEWS.

ASIATIC CHOLERA: ITS HISTORY, PATHOLOGY, AND MODERN TREATMENT. By A. J. WALL, M.D. Lond. London: H. K. Lewis. 1893. (Demy 8vo, pp. 188. 6s.)

DR. WALL has enjoyed extensive opportunities of studying cholera, both in its “home”—the delta of the Ganges—and in countries invaded by the disease—in Italy, Spain, Germany, and Hungary. He has thus seen the disease on native and foreign soil, as a permanent endemic and as an occasional epidemic. He has brought to bear upon the study an observant and discriminative mind, and this treatise is the outcome of much original observation and research, combined with wide knowledge of all that has been done and written by others. The publication of his experience and views at the present time, when we seem in England to be in the winter pause between the sporadic autumn threatenings and a too probable summer development of a fresh invasion, is very opportune; but, apart from this circumstance, which imparts to cholera literature at the present time a special interest and value, this is an excellent piece of work, full of most instructive material, presented in a manner that renders perusal of the treatise a very agreeable task.

The sketch of the history of Asiatic cholera, which is the subject of the first chapter, is concise and clear, and the conclusions therefrom formulated in the second chapter natural and concordant. The agency of man in the dissemination of cholera is prominently brought out, and the part played by commerce, pilgrimages, and emigration in its diffusion fully established. The effect of soil, climate, and season on its prevalence and spread is acknowledged, and its importation by means of soiled clothes and linen illustrated by numerous instances.

The account of symptoms in the third chapter is very well drawn up and cleverly illustrated by the details of typical cases seen and recorded by the author. The fourth chapter—

on the pathology of the disease—contains a good summary of the more striking lesions found on *post-mortem* examination, and an elaborate explanation of symptoms in the light of these. Cholera, it is shown, presents in different cases and epidemics a great variety of phases, and some of these are differentiated by names, a typical, hyperthermic, uramic, abortive, dysenteric, typhoid, and ambulatory form being distinguished, as well as a cholera with imperfect reaction. These, of course, are mere variations, depending on individual peculiarities and powers of resistance, dose of the poison, stage of the disease, and other circumstances; but it is useful for purposes of diagnosis and treatment to have all possible manifestations of the disease in view. The observations on so-called cardiac thrombosis in cholera collapse, its significance, physical signs, danger, and occasional resolution are peculiarly interesting. We have much to learn regarding these white clots which form in the heart and large vessels under so many different conditions. The chapter on treatment is good, though naturally somewhat disappointing. The value of early treatment, of checking the diarrhoea, of rest, warmth, and sedulous nursing, is fully recognised. The hypodermic administration of opium in the stage of evacuation (but not later) is approved, and the use of saline intravenous injection in the collapse stages recommended. Calomel and castor oil and irritating antiseptics are condemned, and the use of the warm bath and friction extolled. The necessity of avoiding irritating articles of food during convalescence is urged.

In the chapter on etiology the influence of filth and filthy water as adjuvants is strongly stated, but a specific something in addition is held to be requisite to produce cholera. What that specific something is, Dr. Wall cannot say. He holds that it is far from proved that the famous comma bacillus is the *causa causans* of the disease. On this subject there is a long and valuable disquisition; but the argument would have been stronger if it had not been clothed in words of derisive sarcasm, which betray a lamentable absence of the judicial spirit in which a question of this nature should be handled. At the same time the author admits that the probabilities of the cholera poison being of microbic nature are high.

The last chapter concerns the methods of arresting epidemics. A good point is made of the necessity of taking the different circumstances and conditions of different localities—for example, inland towns, seaport towns, near and remote islands and insular continents—into consideration in devising preventive measures, and of the folly of applying one measure, such as quarantine, to all places and situations indiscriminately. The advantages of inspection, isolation, and disinfection are commended, and the merits of a carefully observed system of notification of infectious diseases extolled. The advisability of organising precautionary measures and arrangements in anticipation of an epidemic is also insisted on.

From the slight sketch which we have given of this book it will be gathered that it is a very readable production, full of interesting information, much original matter, and many lucid arguments, which, while they are by no means beyond criticism, are for the most part based on the results of observation and research. We still require much more light on the subject of cholera causation to enable us to formulate anything approaching to final conclusions.

DIAGNOSTIK DER HARNKRANKHEITEN. Zehn Vorlesungen zur Einführung in die Pathologie der Harnwege. [Diagnosis of Urinary Diseases. Ten introductory lectures to urinary pathology]. Von C. POSNER, *Privat-docent* an der Universität Berlin. 42 Abbildungen. Berlin: A. Hirschwald. 1894. (Demy 8vo, pp. 160. 4 m.)

THIS book consists of lectures given by the author in his courses for students and junior practitioners. The first chapter deals necessarily very briefly with the relations between urinary diseases and the body at large and between general diseases and the urinary organs. It refers to such subjects as catheter fever, sepsis, pyæmia, the bladder in nervous diseases, etc. Urinary discharges are considered in chapter II; secretions from the urethra, prostate, vesiculæ seminales, etc., are here described and differentiated, the

value of the microscope being duly insisted upon. From a practical point of view much stress is laid upon the division of the urethra into an anterior and posterior part separated by the compressor urethræ. All discharges appearing spontaneously at the orifice must come from the anterior part.

In chapter III the disorders of micturition, and in chapters IV and V the physical, chemical, and microscopical examination of the urine are given.

The older methods of distinguishing renal and vesical hæmaturia and pyuria by the intimate mixture of the blood, by the reaction, etc., are rightly looked upon as not giving satisfactory information. The counting of the pus cells by the Thoma-Zeiss apparatus and the consequent estimation of the amount of pus is looked upon as being of value in determining in general the severity of the case.

Chapters VI to X deal with the physical examination of the kidneys, bladder, and urethra by means of palpation, including the bimanual methods and the investigation of the urethra and bladder with the sound including catheterisation. A chapter is given both to the endoscope and cystoscope; the former may, in the author's opinion, yield valuable information as to the condition of the urethra. In respect to the cystoscope a very full and detailed account of Nitze's instrument is given including its method of use. Several very beautiful photographs, also from Nitze, are introduced here. Time must show the exact place which the cystoscope will take in the investigation of bladder disease. It cannot be denied that it has hardly as yet obtained in this country a degree of popularity at all commensurate with its value as laid down in this book.

A short account of the symptomatology of the most common diseases of the urinary passages is appended, and here again the endoscope and cystoscope figure prominently. This book contains a concise account of the diagnosis of these diseases with all the improvements due to modern advance, and is evidently written by one who is experienced and has thought out the subject.

MOVABLE AND INTERMITTING HYDRONEPHROSIS: A Thesis for the Degree of M.D. Aberdeen. By G. D. KNIGHT. London: Baillière, Tindall and Cox. 1893. (Cr. 8vo, pp. 136.)

THE author commences his thesis with an account of a case of double intermitting hydronephrosis which he had carefully watched and recorded for over six years. This case is certainly one of exceptional interest and importance. The cause of the double hydronephrosis was supposed to be the kinking or torsion of the ureters owing to the mobility of the kidneys. The left kidney had in process of time become converted into a large cyst, only a thin layer of the cortex being left at the time it was removed by nephrectomy by Mr. Henry Morris. Four years later the right kidney was opened by the same surgeon on account of its increasing distension by intermittent obstruction of the ureter. The cut edges of the kidney substance were stitched to the lumbar fascia and muscles, and thus a permanent outlet for the urine was provided, and the fixation of the kidney in its position in the loin assured. At first the urine flowed freely through the wound, but by the third week the patient was passing 35 ounces through the urethra daily and only from 10 to 15 ounces through the drainage tube. The author describes the subsequent course of the case thus:

Three months after the operation the patient's appearance had immensely improved. The yellow colour of her skin had disappeared. Her appetite had improved, and she ate better than she had done for years. Vomiting rarely occurred. Very little urine escaped from the fistula, and on some days none at all. On the other hand, the flow *per urethram* had increased to a daily average of nearly 3 pints of healthy urine, an amount which had never been reached during the six years she had been under my care. Coincidentally with this the patient became much thinner, and it was evident that the tissues, the face especially, had been puffed and œdematous before the operation. It was plain that the operation had just been performed in time, and that the relief by the fistula and the fixation of the kidney (which could now be felt deep in the loin about the size of a clenched fist) had not only saved her life, but had given her a possibility of comfort which she had not known for years. The patient is still alive and well.

The author goes on to consider the causes of (a) movable kidney and (b) hydronephrosis, and (c) the connection between these two conditions. He gives the name "the special" form of hydronephrosis to those cases arising from movable kidney, but this can only be for the purposes of the

thesis; it could not be admitted into the general nomenclature of hydronephrosis. He points out that it is in those cases which arise from congenital defects, and from bending, kinking, and torsion of the ureters of movable kidneys that the hydronephrotic tumours of an intermitting kind are formed, whereas pelvic and other swellings which obstruct the ureter by their pressure, though they cause hydronephrosis, rarely lead to such a degree of renal expansion as can be detected during life.

The symptoms and diagnosis of movable kidney and of hydronephrosis are clearly described. The prognosis of movable kidney is judiciously stated as being something between the "absolute immunity from danger" on the one hand, and, on the other hand, the "imminent destruction of strength and even of life, to prevent which nephrectomy ought to be performed," which are the diametrically opposite views held by two different schools of teachers.

In his remarks on the treatment of hydronephrosis the author omits to point out the advantages of early nephrorrhaphy, and he recommends abdominal pads and bandages as giving, "on the whole the best results." This is, we believe, contrary to the opinion of those most experienced in the management of cases of movable kidney. The uselessness, and indeed the frequent increase of symptoms caused by the pressure, of the various appliances which are in use have led to the much earlier and more frequent performance of nephrorrhaphy, and, as the author elsewhere points out, with increasingly satisfactory results.

In discussing the treatment of hydronephrosis too much importance is given to aspiration and to manipulation of the tumour. Both these measures were employed before the days of renal surgery, but experience has shown that the aspirator rarely effects a permanent cure, whilst manipulation and, to a less extent, aspiration of the tumour are dangerous procedures. A collection of 111 cases of hydronephrosis is tabulated at the end of the thesis, and a separate chapter is devoted to an analysis of these cases.

On the whole, Mr. KNIGHT has produced a very readable and instructive thesis, and anyone wishing to obtain information on the subject upon which he writes cannot do better than peruse it.

NOTES ON BOOKS.

DIARIES AND POCKET BOOKS.

MR. FRANK SMITHSON'S Appointment Register is a very handsome standing tablet, especially suitable for professional use; it contains ample space for registering the appointments of each day. It is mounted on a handsome red leather easel. The Engagement Remembrancer, from the same publisher, is a square block to hang against the wall, each day having a page which can be removed after use. The same publisher issues a square *Royal Court Diary* of very handsome appearance, having a page for each day.

Messrs. Cassell and Co. publish, for Letts's Diary Co., Limited, a considerable series of those well-known diaries; among the more convenient of which may be mentioned the Diary No. 8, bound in cloth, one day on a page, published at 6s. 6d. It supplies a considerable variety of useful information, including a Parliamentary guide, list of country banks, and population and market tables, etc. The Diary No. 1, printed on an excellent cream wove, glazed paper, strongly bound in cloth, in large post quarto size, 9½ inches by 7½ inches, furnishes also a whole page for each day, and a tablet for memoranda. This is suitable for the booking of a considerable number of engagements, and is one of the best diaries in existence. Letts's have long made a speciality of medical diaries compiled expressly for the use of the profession, and containing much useful information, with ruled pages for noting obstetric engagements, vaccination, nurses' addresses, monthly cash account, etc. One is published for 54 patients' names daily, varying according to binding from 2s. 6d. to 4s., and another for 108 patients' names daily, varying from 4s. to 5s. 6d. They have also a new Russia wallet, leather lined, with four pockets and stamp and card pockets, for 10s., and a special wallet with receptacles for instruments in Russia leather for 16s. 6d.