upper flap, but the narrowness of the upper flap and the absence of an anterior frenum renders that somewhat doubtful.

Other folds: On outer side, two well-marked folds cross between anterior and postero-external bands, one \( \frac{1}{4} \) inch below, the other \( \frac{2}{3} \) inch above end of posterior frenum. Constriction caused by upper might be mistaken for limit of cæcum. They are continued as ridges a little way beyond postero-external band, lower one running up to frenum. Between these two large folds is a narrow one in line with lower part of bifurcated end of frenum. Accessory to upper flap of valve, on inner side of colon, a narrow fold descends obliquely backwards to near fore part of middle of flap, which might do a little as substitute for anterior frenum.

No. 23. Four specimens showing variable length of Appendix Vermiformis, one six inches in length.

These four specimens are detached from the cæcum, and laid together to show comparative length. (1) The longest is 6 inches, diameter about \( \frac{1}{2} \) inch, wider on distal inch. (2) One, \( 4\frac{1}{2} \) inches in length, diameter about \( \frac{1}{2} \) inch, not inflated on distal inch. (3) One, \( 3\frac{1}{2} \) inches, well inflated throughout and shows considerable tapering; on first half inch, tapers from \( \frac{1}{4} \) to \( \frac{1}{2} \) inch; rather before middle, it has diminished to \( \frac{1}{4} \) inch, and retains that diameter to the blunt end. These three specimens have still attached to them a short funnel of the cæcum. (4) One, \( 2\frac{1}{2} \) inches in length, has arisen abruptly; diameter, on first half inch, \( \frac{1}{4} \) inch; at middle, diminished to \( \frac{1}{4} \) inch; last quarter inch tapers to a pointed end. In all dried specimens the diameter of the appendix is probably somewhat less than natural. The shortest appendix in all my specimens is that of No. 18, the length \( \frac{2}{3} \) inch.

(To be continued.)

Part Second.

REVIEWS.

Selected Monographs on Dermatology. UNNA, NIELSEN, DUHRING, BRONSON, BLANC, BERGER, PRINCE-MORROW. London: The New Sydenham Society: 1893.

It is no easy task to select from the mass of writings which deal with diseases of the integumentary system, a limited number of such outstanding excellence as to justify their being reproduced in a volume of the New Sydenham Society's series. When we say that this has on the whole been satisfactorily accomplished in the book before us, it reflects no small credit on the acumen and vigilance of the editors and committee. Such a work must be cosmopolitan in its aim, which is to rescue from oblivion landmarks in progress, to be referred to in after-time as guides or indications of the position certain questions have attained at a definite era.

The first place is accorded to Unna, as a recognition of his many-sidedness of view, his rare suggestiveness, his originality and independence of opinion. There are, indeed, few men who have been able so thoroughly to free themselves from the shackles of pre-conceived ideas, and boldly to strike out in a novel path of thought.
Whether we peruse his interesting lectures on the general pathology of the skin, or study in his company the connexion which exists between the seborrhœic process and the eruptions in syphilis, or inquire into the question of the varieties of favus, or learn from him the advances which have been made—many of these emanating from his ingenious brain—in the therapeutics of the skin, one cannot fail to own that he has learned something new and valuable. The excerpts from his numerous writings, of which a full list is appended, is without doubt a representative one, but there are one or two papers which we should have wished had been included, in particular one on Ichthyo! and Resorcin, which appeared as an extra part of the Monatshefte for 1886, one of the Dermatologische Studien by various authors, all of which are of much scientific importance. It has been found necessary, too, to condense some of the articles, and though this has been admirably done by Dr Abraham, still this has led to an unavoidable sacrifice of lucidity in argument in some instances.

Nielsen of Copenhagen is represented by two contributions,—one on the Appearance of Herpes Zoster during the administration of Arsenic, scarcely quite convincing, and a second on Psoriasis, much more valuable, and which lends some additional support to the parasitic theory of the disease, while stating fairly and comprehensively the other hypotheses of its causation. This article, the offspring of one of the younger dermatologists working under the eye of Haslund, is well worth reading.

The claims of Duhring as the exponent of the doctrine of dermatitis herpetiformis are well met by a reproduction of his numerous papers on that subject, scattered in the main throughout American periodicals, and thus little accessible to the majority of British readers. To him undoubtedly belongs the credit of having raised to an independent position as a distinct disease under that name a group of phenomena which had been previously either overlooked or misinterpreted. It is an excellent instance of the value of the inductive method. At the same time Duhring seems himself to have omitted to notice the descriptions which Bazin and Tilbury Fox gave of an allied or identical disease under the less suitable designation of Hydra, or Hutchinson's résumé of such cases under the same denomination. Hutchinson, indeed, recanted at a later time, and thought iodide of potassium was the culpable agent in some, if not all, missing the explanation afterwards furnished by Brocq, that iodide when administered in cases of dermatitis herpetiformis intensifies to an extraordinary degree its lesions and symptoms generally. Duhring unaccountably leaves most, if not all, these points unnoticed, which, when one recalls the extent of his reading as shown in his treatise on Diseases of the Skin, is quite inexplicable, and detracts from the completeness of these articles.

The clever brochure of Dr Bronson, another American author, on The Sensation of Itching, also well merits the space allotted to it.
The connexion he deduces between pruritus and a perversion of the sense of contact is original, while the whole paper gives evidence of high logical power.

More and more frequently of recent years attention has been directed from all sides to the consideration of the affection called originally by Alibert, Mycosis fungoides, a term which, till the true nature of this remarkable disease becomes further elucidated, had better be retained. Blanc's report of a case is so full, and refers to such a typical example, that it is well worthy of being included in this volume, for it will certainly serve good purpose in enabling it to be more readily recognised.

The short account of Pellagra by Berger of Gradisca gives in a succinct manner the chief features of a disease which is far more common than is suspected in countries where maize forms a principal part of the dietary. The inanition and the intoxication theories of its origin are discussed, and the author's adhesion to the latter is fully justified.

The most valuable of the whole contents for the general reader is, however, the Clinical Study of Drug Eruptions by Dr Prince A. Morrow, here edited and annotated by Dr Colcott Fox. The original work was the best treatise extant on the subject, and the additional matter contributed by Dr Fox has brought it completely up to date. The importance of such a compendium of the manifold disorders of the skin which arise from the remedies, new and old, in more or less constant use, need not be insisted on. If the Sydenham Society had done no more than place this amended reprint in the hands of their members, it would in itself have proved of great utility.

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Microscopic Observations on the Hæmatozoa of Malaria, with an Appendix containing a series of Illustrations and Descriptions.
By Surgeon-Captain Patrick Hehir, M.D. The Indian Medical Record, Vol. VI., Nos. 7, 8, 9.

Some Objections to the Hæmatozoic Theories of Malaria. By Surgeon-Captain Ronald Ross. The Medical Reporter, Vol. II., No. 3, March 1, 1893.

These two papers form a marked contrast. They were both written in India; they both deal with the subject of malaria and with the supposed cause of that disease. A very brief résumé will be interesting. We will deal with the latter paper first.

Surgeon-Captain Ross fears that Laveranism is about to be completely victorious in India; but whilst acknowledging that Indian medical men do not obtain and read every scientific memoir on the subject of fever, yet they have "half a dozen cases under daily observation and treatment, and we [they] possess every opportunity
of studying accurately the symptoms and progress of every sort of endemic fever.” This being the case, one reads with surprise in this paper that a large number of observers in India are dissatisfied with the views given in the text-books, and they think that the old heroic definitions of Martin and Maclean appear to be more or less fabulous; and the author endeavours to show why it is extremely improbable that the large majority of Indian fevers are due to any specific poison inhabiting the blood, and why, while certain organisms may quite possibly be found in the blood in these cases, their presence there is probably quite a secondary matter. It seems strange that, with all the opportunities possessed by Indian medical practitioners, they have not before now come to some definite conclusion upon this important subject. Surely it is important enough, and we have a right to expect from them more definite proofs of the opinions they are said to hold than mere criticism of work done by competent observers in Europe and America. Dr Ross holds that “the great Indian fevers—simple continued fever, febricular, remittent, intermittent, enteric fevers—are probably originally not blood diseases at all, but intestinal diseases; and in them the pyrexia is a secondary fever, arising from sepsis or from actual lesions of the digestive tract.”

Thus Surgeon-Captain Ross believes that Indian endemic fevers are sister diseases of diarrhoea, dysentery, and hepatitis, the whole cycle being produced by one single condition, that known as intestinal sepsis. The author concludes his paper as follows:—“For the solution of the Indian fever question what we want is clear definition of ideas, careful scrutiny of all assumptions, and a common-sense interpretation of the phenomena before us; and they are much mistaken who imagine that so vast and various a problem will ever be solved by a single coup de microscope.” The author also writes—“Then, does one really believe that all so-called malarial fever in America, Africa, Europe, and Asia is due to one single species of organism? He must be sanguine indeed who does so. Contagious diseases which are carried about from man to man may be so, but hardly endemic diseases. No; these fevers are probably not zymotic, not haematozoic, not specific at all. They are intestinal, and allied to septic fevers.”

But is this so? Laveran’s researches in Africa were confirmed by Richard in Paris in 1882, by Machiafava and Celli in 1885, by Councilman of Baltimore and Osler of Pennsylvania in 1886, by Golgi also, and finally by Vandyke Carter, and Prof. J. F. Evans in India. So that in Europe, Asia, Africa, and America it has been proved that a single species of organism has been found in intimate connexion with malarial fever, and this leads us to Surgeon-Captain Hehir’s researches, which are published in the Indian Medical Record. He has examined 2179 fresh and 1102 stained slide preparations of malarial blood from 343 cases of malarial fever, and in only 45 of the cases examined were the results in regard to
the presence of the more mature forms of malarial organism negative. We have not space, nor is it necessary, to refer in detail to this paper, but as a matter of fact all the appearances mentioned by Laveran were repeatedly recognised, as well as a special body named by the author the Hæmatomonas Malariae Stellata, which is a peculiar body having the following characters:—"It is spherical, with a thick, well-defined circumference, and clear hyaline contents, highly refractive, with three to six well marked cilia-like processes passing in a straight line from the surface. These cilia are about $\frac{1}{2000}$ in length, and $\frac{1}{10000}$ in breadth. They contain a pinkish pigment, and move with an oscillating motion. Sometimes the body is irregular in shape; at others it consists of an excessively small spherical, highly refractive, spore-like structure." The author makes some very valuable remarks on the diagnostic importance of the hæmatozen of malaria, on the clinical value and relations of the discovery of Laveran, and on the use of quinine in malarial diseases.

Further Report and Papers on Epidemic Influenza, 1889-92; with an Introduction by the Medical Officer of the Local Government Board. London: Eyre & Spottiswoode, Printers to the Queen’s most Excellent Majesty: 1893.

Herein, besides the short introduction, will be found a further report on Influenza by Dr Parsons, divided into seven parts, and one on its clinical and pathological aspects, by Dr Klein. We pick out from Dr Parsons’ report the following items: “It is to be feared that the contagion of influenza must be regarded as still domiciled with us, and that a renewal of its epidemic activity within the next few years is by no means improbable.”

The epidemic was not most deadly in those parts of the country usually shown to be the most unhealthy by the annual death-rate, nor were the deaths from influenza most numerous in those counties where the death-rate from respiratory diseases was greatest. (This, however, may be fallacious, as it is notorious that the respiratory disorders resulting from influenza are constantly regarded as simple attacks.) Those “counties which have a low birth-rate have a high influenza death-rate, and vice versa.” The second and third epidemics attacked fewer people, but were more deadly in their results. The returns of the Registrar-General do not support the view held formerly that during the prevalence of influenza other epidemic diseases subside. Dr Klein corroborates Pfeiffer and Kitasato as to the presence of a minute non-motile bacillus in the sputa of influenza patients, and regards it as pathognomonic. Several very excellent Plates illustrate the form and life-history of this bacillus.
A Text-book of Medicine, for Students and Practitioners. By Dr Adolf Strümpell, Professor and Director of the Medical Clinique at Erlangen. Second American Edition, translated from the Second and Third, and thoroughly revised from the Sixth German Edition by Herman F. Vickery, A.B., M.D., and Philip Coombs Knapp, A.M., M.D., with Editorial Notes by Frederick C. Shattuck, A.M., M.D. With one hundred and nineteen Illustrations. London: H. K. Lewis: 1893.

We welcome a second edition of this excellent text-book of medicine revised from the recently published sixth German edition. We admire some other text-books on the subject for greater rhythm and attractiveness in style; and others, again, have a greater originality or audacity; but for good, sound, safe information the volume before us would be hard to beat. Without hazarding any extreme opinions, but steering a middle course, while at the same time commenting on the different theories of the present and the past, the author shows his great learning on every page. In the last edition, also, the latest discoveries, or at any rate those which have been verified, are incorporated in the text both by the author and by the translators and editor. It would be out of place in criticizing the sixth edition of a well-known work to point to the few places where the substance does not agree with our teaching in Scotland, but we would like to draw the attention of the editors to the possibility of improving the illustrations in their next issue. Some of the woodcuts are very rude.

Sciatica: A Record of Clinical Observations on the Causes, Nature, and Treatment of Sixty-eight Cases. By A. Symons Eccles, M.B. Aberd., M.R.C.S.E., etc. London: Macmillan & Co.: 1893.

Sciatic Neuritis; its Pathology and Treatment. By Robert Simpson, L.R.C.P., L.R.C.S. Bristol: John Wright & Co. London: Simpkin, Marshall, Hamilton, Kent, & Co., Lim.: 1893.

These publications are both small, the first being the more pretentious. Dividing Sciatica into the three classes of neuralgia, perineuritis, and neuritis proper, Dr Eccles goes carefully into the good results of absolute rest, electricity, and, above all, skilful massage. His remarks may be read with advantage, and some of his "tips," such as the use of a flat-iron electrode to combine the good of pressure and electricity, and of Schreiber's blocks in training the affected limb during convalescence, are good. Dr Simpson goes over much the same ground, but with bigger strides. The length of some of his sentences would do credit to a German novel of the old school. He also has found rest and massage to be the most useful forms of treatment.
A Treatise on Ruptures. By Jonathan F. C. H. Macready, F.R.C.S. London: Charles Griffin & Co.: 1893.

We are not inclined to accept the modest statement of the author in his preface to this work, that it is intended to supply the most essential facts concerning ruptures; and that, looking to the vast extent of the subject, it is little more than an outline. We are confident that the majority of readers will find it sufficiently exhaustive, and that they will regard it as a book of reference. It is certainly by far the most complete and authoritative work on the subject with which we are acquainted, and we conscientiously recommend its acquisition by all those who have to deal in practice with the affection of which it treats. The text is clear and concise, the numerous illustrations are reproductions from photographs from Nature; the author's statements are founded on an unique experience, which is freely drawn upon; the statistics of hernia are based largely on the records of the City of London Truss Society, of which those relating to inguinal and femoral ruptures alone comprise some 20,999 individuals.

It is not our intention to refer in detail to the arrangement of subject-matter, or to the views propounded by the author. If there be one chapter open to criticism, it is that on the "operative cure" of hernia, which term we confess to prefer most decidedly to that of "radical cure" in general use. While it is well said that the choice between the subcutaneous and the open operations for hernia must be considered as already decided, we do not think that the principles of operative cure are properly placed before the reader. As a matter of fact, no operation is described in detail excepting that devised by Macewen, which is quoted, in small print, from the original, while the operative cure of femoral hernia is dismissed with four lines, of which two include the statement that the closure of the femoral ring can hardly be made effectually, on account of the proximity of the femoral vein.

The volume is well furnished, and is provided with a complete table of contents, a full index, and an exhaustive list of references to other works and papers on the subject.

A Dissertation on Osteo-Arthritis. By W. H. Russell Fosbrook, M.D. Lond., M.R.C.S. London: H. K. Lewis: 1893.

Although based upon a comparatively limited personal experience, this work, which was originally written as a thesis for the degree of Doctor of Medicine of the University of London, supplies the practitioner with an able and instructive summary of our knowledge of what is, at the hands of many, rather a neglected disease. The author, while recording very carefully the views of previous writers from Heberden to Charcot, gives ample evidence of having personally observed and studied the malady in question.
He lays great stress on the important part played by anaemia as an exciting factor in individuals possessing what has been termed an arthritic proclivity or inborn predisposition to joint troubles. He ventures to suggest that a deficiency of oxygen in the blood, by acting on the medulla, induces vaso-motor disturbances of an intermittent and persistent character, and specially affecting the joints. He certainly succeeds in making his theory accord with the anatomical peculiarities and clinical features of the disease. He does not regard the existence of a special trophic centre as essential. We recommend the book to our readers as one which will repay perusal.

The Treatment of Constitutional Syphilis. By Oswald Ziemssen, M.D., Wiesbaden. London: H. K. Lewis: 1893.

This little book, written in very good English, is meant to show that syphilis can be treated as well at Wiesbaden as at Aix-la-Chapelle, if not better.

The treatment at these Continental watering-places would not hold its place for a day, so far as syphilis is concerned, were it not for the copious inunction of mercury. The baths and waters are merely used as mechanical means for washing off the mercurial ointment, or washing down doses of iodide of potassium. The following quotation, from the words of a practitioner at Aix-la-Chapelle, is evidence that this view is held by some of the resident practitioners themselves:—"Our sulphur springs would undoubtedly not have gained a great reputation if we could not have got mercury from the druggists' shops."

The thermal springs at Wiesbaden are considered by the author superior to those of Aix-la-Chapelle, on account of the larger amount of chloride of sodium contained in the waters of the former place. The presence of salt is believed to increase the curative action of mercury. The system used abroad in the treatment of syphilis is no better than any other mercurial treatment at home, and is greatly more expensive, as it is considered necessary to have the so-called inunction cure applied by skilled nurses.

Psychopathia Sexualis, with especial reference to Contrary Sexual Instinct: a Medico-Legal Study. By Dr R. von Krafft-Ebing. Translated by Charles Gilbert Chaddock, M.D. Philadelphia and London: The F. A. Davis Co.: 1893.

On concluding the perusal of this book, we could not help asking ourselves the question, "Can the publication of all this filth serve any good purpose?" and the unhesitating answer was "No."

We decline to believe that science calls for the publication in detail of the autobiographies of masturbators, wontings, Sodomites, and of those miserable creatures of both sexes who have perverted sexual desires.
There is no doubt that, in very many cases, Krafft-Ebing dignifies the vilest forms of vice by classifying them under diseased conditions, although in a certain number of cases the taint of mental disease may lay a foundation for some of the horrible perversions of sexual instinct described.

Hypnotic suggestion has, since 1890, been added to the other therapeutic means in the treatment of such cases. Here is one of the intra-hypnotic suggestions made in the case of a person who had acquired "contrary sexual instinct," viz., "The command to regard only women as beautiful; to approach them, to dream of them, and to have libido and erection at sight of them." Let us be thankful that the medical profession in this country have not sunk so low as to recommend the substitution of one form of vice for the cure of another.

When speaking of the levying of blackmail upon pederasts in Berlin, the author advises the abandonment of prosecution for pederasty.

We greatly regret that this work was translated.

The Rotatory Movements of the Human Vertebral Column and the so-called Musculi Rotaores. By A. W. Hughes, M.B. Edin., F.R.C.S., etc., Lecturer on Anatomy in the Edinburgh School of Medicine. Edinburgh: E. & S. Livingstone.

This monograph is reprinted with additions from the Archiv für Anatomie und Physiologie. It contains the results of a series of observations which were made upon the cadaver in order to determine the amount of rotation which can occur between the various vertebrae. The principal conclusions are that the normal lumbar spine possesses only an extremely slight power of rotation, while this movement is considerable in the dorsal region, amounting in the whole of this portion of the spine to at least half a right angle, and in many cases even to a right angle. The rotation stops abruptly at the junction of the 11th and 12th dorsal vertebrae. Contrary to the usual opinion, Dr. Hughes found that the rotation of the cervical vertebrae is much greater that that of the dorsal.

The entire work bears evidence of careful observation, and forms a useful contribution to the mechanism of the human skeleton.

Dissections Illustrated: A Graphic Handbook for Students of Human Anatomy. By C. Gordon Brodie, F.R.C.S. Part II. The Lower Limb, with twenty Coloured Plates and six Diagrams. London and New York: Whitaker & Co.

We have already reviewed Part I. of this work, which dealt with the Upper Limb. The favourable opinion we then expressed is equally applicable to Part II. It ought to become a favourite Atlas with students.
On Snake Poison; its Action and its Antidote. By A. Mueller, M.D. Sydney: L. Bruck: 1893.

After giving an historical review, which is well written, although not accurate because not exhaustive, of investigations concerning snake bite in the past, and the unsuccessful attempts to find an antidote, the author details his observations with regard to snake poison, showing it to be a specific nerve poison, depressing and more or less suspending the functions of the motor nerve centres throughout the body, and he advocates the hypodermic injection of strychnine for the cure of the patients. He holds that "it must be administered freely and without regard to the quantity that may be required to develop symptoms of its own physiological action. The doses in which it is injected and the intervals between them must be left to the practitioner's judgment, as they depend in every case on the quantity of snake poison absorbed, the time elapsed since its inception, and the corresponding greater or lesser urgency of the symptoms. If the latter denote a large dose to have been imparted, and it has been in the system for hours [would the patient live so long?], delay is dangerous, and nothing less than 16 minims of liquor strychninæ B.P., in very urgent cases even 20 or 25 minims, should be injected to any person over 15 years of age. . . . . The action of the antidote is so prompt and decisive that not more than fifteen to twenty minutes need to elapse after the first injection before further measures can be decided on. If the poisonous symptoms show no abatement by that time, a second injection of the same strength should be made promptly, and unless after it a decided improvement is perceptible, a third one after the same interval. As the action of strychnine when applied as an antidote is not cumulative, no fear needs to be entertained of violent effects suddenly breaking out after these large doses repeated at short intervals. They are, so to say, swallowed up by the snake poison, and remain latent, except in counteracting the latter. This has now been proved abundantly by scores of qualified observers in all parts of Australia, and still more by Banerjee in India." This treatment ought certainly to be extensively tried.

The Clinical Use of Prisms, and the Decentering of Lenses. By Ernest E. Maddox, M.D. Second Edition, Revised and Enlarged. Bristol: John Wright & Co.: 1893.

Dr Maddox's writings have attracted much attention, not only in this country, but also on the Continent and in America. Only four years have elapsed since the appearance of the first edition of his valuable work on the clinical use of prisms, and we have already a second edition, containing twice as much matter as the first. It may be said at once, that excellent as was the first edition, the present is in every way an improvement upon it, and
is indeed a work of which the Edinburgh School may well feel proud.

Writers of monographs, especially on ophthalmological subjects, do not, as a rule, find a large number of readers. That Dr Maddox has been more fortunate than most in this respect, is partly due to the importance of the subject of which he treats, as well as to the meagre consideration which it has received at the hands of authors of general treatises on eye diseases. It is also due to the excellent judgment which he has shown in avoiding any exaggeration of its importance. Though the subject may be a favourite one with the author, it is not treated as a "hobby." There is a noteworthy discrimination to be observed throughout the work between what is practical and what is merely theoretical. This quality is even more evident in the new edition, in which the difficult subject of the clinical application of prisms for diagnosis and treatment is handled in a manner which to few readers will not convey some new and useful information, and which to the majority even of professed ophthalmologists will afford much matter for profitable study.

_A Practical Treatise on Materia Medica and Therapeutics, with special reference to the Clinical Application of Drugs._ By John V. Shoemaker, A.M., M.D., Professor of Materia Medica, Pharmacology, Therapeutics, and Clinical Medicine, College of Philadelphia, etc. In two volumes, Second Edition, thoroughly revised. Philadelphia and London: The F. A. Davis Co.: 1893.

The first volume is devoted to Pharmacy, General Pharmacology and Therapeutics, and remedial agents not properly classed with Drugs, such as climate, diet, heat, cold, etc., whilst the second volume may be regarded as an independent work upon Drugs. The first edition of vol. I. was published only four years ago, and the first edition of vol. II. only two years ago, and now a new edition of both volumes is published. This shows the popularity of the work. We had occasion formerly to notice very favourably these volumes of Professor Shoemaker, and here it is only necessary to say that the author in this edition has brought the subject well up to date, and includes all the newer remedies, such as animal extracts, etc. We wish these volumes a wide circulation.

_A Handbook of Local Therapeutics._ Edited by Harrison Allen, M.D. London: H. K. Lewis: 1893.

This work is one which deserves a wide circulation, and is a valuable work of reference. It will be especially useful to those engaged in general surgery, dermatology, laryngology, ophthalmology, etc.

The book has really four authors. The General Surgery is by
Dr Richard H. Harte, Pennsylvania; Diseases of the Skin, by Dr Arthur von Harlingen, Professor of Diseases of the Skin, Philadelphia; Diseases of the Ear and Air Passages, by Dr Harrison Allen, Philadelphia; and Diseases of the Eye, by Dr George C. Harlaw, Emeritus-Professor of Diseases of the Eye, Philadelphia. The various medicines are arranged alphabetically, and the local actions of the various drugs are, as a rule, succinctly and correctly stated. The book contains much valuable information.

Wright's Improved Physicians, Surgeons, and Consultants' Visiting List. Compiled by Robert Simpson, L.R.C.P. & S. London: John Wright & Co.

This Visiting List for 1894 will be useful to practitioners, especially to those engaged in large practice.

**Part Third.**

**PERISCOPE.**

**MONTHLY REPORT ON THE PROGRESS OF THERAPEUTICS.**

By William Craig, M.D., F.R.S.E., Lecturer on Materia Medica, Surgeons' Hall, etc., etc.

**Trional as a Hypnotic.**—In the Neurologisches Centralblatt, November 25, 1892, Dr Brie of Bonn gives an exhaustive account of his experience with this recent addition to our therapeutic armamentarium. He describes trional as a white powder similar to sulphonial. It is difficult to solve in water at the ordinary temperature, but is easily soluble in hot water and in alcohol and ether. The watery solution has a slightly bitter taste. He had used it in forty-two cases of insanity, about 300 doses having been administered of 1 to 3 grammes. It was dissolved in hot water, and given half an hour before retiring. As a general rule, sleep followed within an hour. According to the results of his numerous observations, trional possesses an extraordinarily favourable influence. It should be the first drug mentioned and recommended as a hypnotic. It is almost tasteless, is easily administered, acts rapidly, and after-effects are rarely manifested. Its use is indicated in simple insomnia, and also in the sleeplessness of insanity, associated with restlessness and marked excitement.—Charlotte Medical Journal, August 1893.

**Losophan.**—Recently a compound of iodine and cresol has been brought forward, under the name of losophan, which seems to possess all the essentials of an effective remedy in parasitic diseases of the skin. The combination of iodine and cresol, both of