In his introduction the author very simply and wisely calls attention to the great need for a proper and due regard to be paid to the very plainest duties of mothers as regards their daughters. We all know how often these duties are neglected, and how, in consequence, much discomfort and suffering are borne for years. The rules which he seeks to lay down during the pregnant state are excellent, and should be studied by everyone who seeks to be guided wisely at that time. We cannot quite agree with him when he says that every young wife, finding herself pregnant, should consult a medical man in order to discover whether she suffers from any displacement. Very few young women will submit to this; but the case is quite different when she reaches, say, the seventh month. The advice there given for that time is quite sound, and if this were more frequently and methodically done, it would prevent many complications and save not a few lives.

The chapter on labour is very good, the advice in general being fresh and up to date. But when the author goes the length of advocating the administration of chloroform in the first stages of labour—we refer to normal labour—to make it comparatively painless and yet absolutely safe, we are afraid that not everyone will agree with him. And we question whether the time has yet arrived when its administration should be advocated in such wholesale fashion. If it was to be carried out as indicated in this book, it would entail considerable waiting on the part of the medical man, and consequent inability to get through his daily duties. Women themselves are not quite prepared for this, though there is a certain class who clamour for it, and many even who bargain for its administration when engaging the medical man to attend them. It may be all very well in the better and upper classes, where good fees are obtainable, but the case is very different in the other classes; all the same, we appreciate the motives of the author, viz., the relief of suffering women.

The chapters on the lying-in period and care of the infant are very full and well written. As becomes the importance of the subject, the chapter on infant feeding is exceedingly good
and up-to-date; and if all the instructions given are followed out to the letter, the infantile mortality, usually so great in all our large cities, would very soon be materially lessened.

An excellent chapter on hygiene in the house and surroundings completes the book, which is one that we can confidently recommend to the careful study and perusal of all for whom it is written. The author has kept to laying down general principles to guide young women through the troublous and perplexing paths of married life, and we think he has been successful.

Diseases of Women, a Clinical Guide to Their Diagnosis and Treatment. By George Ernest Herman, M.B. Lond., F.R.C.P. With upwards of 250 Illustrations. London: Cassell & Co., Limited. 1903.

As its title indicates, this work is rather a clinical than a systematic treatise on gynaecology, and in his preface the author claims to have one qualification "not always possessed by authors of text-books, namely, clinical experience." That is, no doubt, a most valuable qualification if the experience has been carefully analysed and appraised as it was acquired. But it is often the case that the result of experience is merely to furnish the observer with general impressions which are insufficiently tested, and have no scientific value whatever. The value of experience is dependent on the person who acquires it, and will be set high or low by others according to the esteem in which he is held. In Herman's case this is evidently considerable, as the work, which was first published in 1897, was reprinted in 1899, and is now issued in a revised edition. As a treatise on diseases of women, however, it is scarcely worthy of the reputation of the author.
carried out that difficult operation of putting new wine into an old bottle. New sections have been added—on the “Examination of the blood,” the “Examination of the gastric contents,” “Intestinal parasites,” the “Cranial nerves,” and on “Clinical bacteriology,” while the illustrations have been largely increased.

The various methods for the examination of blood, gastric contents, bacteria, &c., &c., are accurately and adequately described. The numerous illustrations and diagrams constitute not the least valuable and serviceable part of the book, and are most appropriate to the subject matter.

We are not very enthusiastic about the graphic method of representing physical signs here depicted, and we are also not very sure of the helpfulness of the criss-cross arrangements for showing the areas of audition of cardiac murmurs. We observe it is recommended that, in delimiting the cardiac dulness—“deep dulness”—strong percussion be used. We consider that Dr. Boyd draws too strong a distinction between deep and superficial dulness, and as we have given our allegiance to those clinicians who employ a gentle stroke, and claim to map out with the same neither the deep nor the superficial cardiac dulness, we cannot but deprecate this advocacy of strong percussion, in spite of the fact that Dr. Boyd has confirmed post-mortem the accuracy of his results obtained during life. This, however, is matter of opinion, perhaps of schools, and may even be prejudice, and we have the greatest confidence in recommending this work as an embodiment of sound and up-to-date clinical teaching.

Development of the Human Body. By Prof. J. Playfair M'Murrich, University of Michigan. London: Rebman, Limited. 1903.

We can heartily recommend this text-book of embryology to students of human anatomy. It is moderate in size, and is written, on the whole, in a simple, straightforward style. The illustrations are excellently reproduced, most of them being from classical sources. The matter is well up-to-date, and contains a satisfactory résumé of what is now known regarding human development.

General embryology hardly comes within the scope of the book, and, accordingly, one misses the discussion of many interesting questions; but in the first chapters sufficient
information is given regarding ovogenesis, segmentation, &c., in other animals to form an adequate introduction to purely human development at the earliest stages at which material for its study can be obtained.

As is inevitable, the small compass of the book leads occasionally to obscurity or inadequacy of statement, but we have only observed this in paragraphs dealing with comparative embryology, as, for instance, on pages 362, 363, where reference is made to the *pronephros* and *metanephros* of lower vertebrates.

The book closes with a short and suggestive chapter on post-natal development.

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*The Prize Essay on the Erection of a Sanatorium for the Treatment of Tuberculosis in England, together with a Preface by the Chairman of His Majesty's Advisory Committee, a number of Appendices, Illustrative Plans, and a Bibliography.* By Arthur Latham, M.A., M.D.Oxon., M.A.Cantab., in association with A. William West. London: Baillière, Tindall & Cox. 1903.

The circumstances under which this essay was written are doubtless well known to our readers. A large sum of money was placed at the King's disposal for philanthropic purposes, and His Majesty decided that it should be devoted to the establishment of a sanatorium for consumptive patients in England. As a preliminary step, three prizes, amounting in the aggregate to £800, were offered for the best essays and plans indicating the lines on which the most approved sanatorium should be erected. The competition was open to medical men of all nationalities, and a competitor might, if he chose, associate himself with an architect. The first prize of £500 was awarded to Dr. Latham and Mr. West, and we have now the prize essay before us.

Part I is a discussion of the principles to be followed in the erection of a sanatorium for the treatment of tuberculosis; it makes capital reading. Part II is an attempt to carry out these principles by the construction of suitable buildings. Numerous illustrative plans are provided, and there is also a long series of appendices on matters of importance in connection with this subject, the first being a summary of the main features of the scheme submitted. The volume concludes with an extensive bibliography and an index.

The essay ought to be studied by all, whether medical men or
others, who are interested in the establishment of consumptive sanatoria, and many others might find profit and enjoyment in perusing its pages.

An Atlas of Illustrations of Clinical Medicine, Surgery, and Pathology (chiefly from original sources). Fasciculus XV (Double Number) or III and IV of New Series. Plates (with colour) XCII to XCVII, Plates (without colour) A to M. Xanthelasma and Xanthoma, with Special Reference to their Association with Functional and Organic Diseases of the Liver. With Preliminary Remarks and Illustrative Case Narratives compiled by Jonathan Hutchinson, F.R.C.S., F.R.S., LL.D. London: The New Sydenham Society. 1902.

Mr. Hutchinson may be said to touch nothing that he does not adorn, and the thoroughly philosophical way in which he discusses xanthoma in this Atlas will maintain his reputation not only as one who is absolute master of his subject, but as one who, by his own brilliant genius, can throw a flood of light on that subject, and thus assist others to arrange their facts and ideas. The point of view from which the present essay is written may be inferred from the author's introductory remark that the fasciculus might have been appropriately entitled "On Disorders of the Liver Functions as Illustrated by the Affections of the Skin known as Xanthelasma and Xanthoma."

After some preliminary observations on matters of pathology, history, and nomenclature, Mr. Hutchinson proceeds to distinguish and describe five groups of cases:—(1) Xanthelasma (palpebrarum), (2) generalised eruptive xanthoma (diabeticorum), (3) family xanthoma, (4) icteric xanthoma (the xanthoma of persistent jaundice), and (5) erratic forms. He retains the designation of xanthelasma to indicate the wash-leather patches in the eyelids only. This was its original application. The other groups are included under the term xanthoma. Attention is called to features which suggest affinity between xanthoma, lichen planus, psoriasis, and urticaria. A valuable basis for a systematic account of xanthoma is provided by the author in the form of a full list of the portraits of the disease in the Polyclinic Museum, and of the casts in the Hôpital St. Louis in Paris, with a description of each case.

In some subsequent remarks on the mutual relationship of the several forms, Mr. Hutchinson points out that their bonds
of connection are, first, their association with disturbance of the hepatic function, and, second, the fact that the peculiar colour, which is the most distinctive feature of the patches, is probably due to a derivative of bile. He also shows that glycosuria is not a constant feature of the variety known as xanthoma diabeticorum. A series of case narratives illustrating xanthelasma (palpebrarum) shows "the influence of recurring attacks of liver disturbance in producing various changes in the state of the eyelid:—First, pigmentation more or less persisting, but prone to temporary increase in those parts of the lids now known as the 'xanthelasma positions'; second, the development of grouped comedones in these positions; and, third, the formation of the patches of yellow fatty deposit which constitute xanthelasma in its typical form." Cases are also given to exemplify the occurrence of the disease in childhood, and its hereditary transmission. Another series of case narratives shows xanthoma occurring as a general eruption, and often attended by diabetes.

The plates present a high standard of excellence, and the reader who studies them carefully along with the text ought to become quite an expert on the subject of xanthoma. One very good plate, illustrating the eruptive form of the disease in the upper arm of a child, is copied from a drawing supplied by Professor McCall Anderson. Further illustrations of xanthoma are in hand, and will appear in a later fasciculus. Meanwhile we may conclude by remarking that the present contribution is one of immense value, and worthy of the attention of all who are interested either in the theory or in the practice of medicine, and of physicians and general practitioners as well as dermatologists.

Die Grosshirnrinde als Organ der Seele. (The Cerebral Cortex as the Organ of the Mind.) By PROF. DR. ALBERT ADAMKIEWICZ, Vienna. Wiesbaden: J. F. Bergmann. 1902. (Obtainable from F. Bauermeister, Glasgow.)

This is an exceedingly interesting work (80 pages, 2 plates, and 1 illustration in the text), consisting, as it does, of an abstract of all that Adamkiewicz has written on the functions of the cerebral cortex and the nerve cells of the same.

A few pages are devoted to anatomical and physiological considerations, after which "The Rudimentary Functions of the Mind" are discussed under the following headings:—(1) Memory and loss of memory, (2) Creative power and mental
faculties of the cerebral cortex, (3) Activity and inactivity of the nerve cells of the cerebral cortex and the "double-ego," (4) Sensation, (5) Will, and (6) Psycho-physical processes and bilateral functions. Then follow the "mental fields" or areas of the cerebral cortex:—(1) Movement, (2) Vision, (3) Hearing, (4) Taste, and (5) Smell.

The different questions involved in deliberating on the mental functions are discussed both with terseness and lucidity, while the perfect genius which the author has for introducing happy similes conduces both to pleasure in reading and ease in assimilating his ideas. Much of the matter touches on very debatable ground, and, needless to say, Adamkiewicz does not always see eye to eye with other workers in this difficult territory.

Diseases and Injuries of the Eye, with Their Medical and Surgical Treatment. By George Lawson, F.R.C.S.Eng. Sixth Edition. With 249 Illustrations. Revised and in great measure Rewritten by Arnold Lawson, F.R.C.S.Eng. London: Smith, Elder & Co. 1903.

The new edition of this text-book, appearing, as it does, after an interval of nearly twenty years, naturally shows many alterations in its arrangement and illustration. The subject-matter has been brought up to date, and into line with the more recent advances in ophthalmology, by the introduction of much new material, and by a thorough revision of the old text. These changes, while greatly enhancing the usefulness of the book, have necessitated a considerable increase in its size.

The new edition, like its predecessors, is particularly strong on the remedial treatment of eye diseases, and in this way it remains of special value to the general practitioner, with whom former editions were always popular. We miss, however, any reference to treatment by subconjunctival injection, which is now a well-recognised method of treatment in various forms of disease of the eye, and probably gives more successful results in detachment of the retina than any other form of treatment.

The various operative measures employed for the relief of eye affections are clearly described, and many of them well illustrated. Few surgeons, however, will be found to endorse the pessimistic view of the author regarding the operative treatment of symblepharon; for while, in severe cases,
complete restoration of function is quite impossible, the general results are certainly much better than here stated. "All operations for the cure of symblepharon are, as a rule, unsatisfactory. . . . It is only in slight cases that positive good will be found to follow surgical treatment."

Regarding the treatment of senile cataract, extraction by the combined method is fully described, but the operation of simple extraction is dismissed after merely mentioning that, while it has many advocates, in the opinion of the author the risk of subsequent prolapse of the iris far outweighs any advantage to be gained by leaving a central pupil. This attitude can be easily understood, as we are told that he "always" performs an iridectomy; and yet we find many surgeons, e.g., Knapp, Schweiger, &c., who have had a large experience of both operations, saying that the risk of prolapse of the iris in simple extraction is no greater that the risk of incarceration in the wound of one of the pillars of the iris coloboma in the combined operation, and stating that the visual results of simple extraction far exceed in excellence those following any other method of operating.

It is an easy matter in most books to pick out isolated points for criticism, but dealing with the volume as a whole, we feel that the work of revision has been carefully and painstakingly performed, and we have every confidence in recommending the text-book, both to the student and to the practitioner, as a reliable guide to the study of the diseases and injuries of the eye, and their treatment.

The index is large, and has been well planned for easy reference.

Obstinate Hiccough, The Physiology, Pathology, and Treatment.
By L. F. B. Knuthsen, M.D. Edin. London: J. & A. Churchill. 1902.

This is a graduation thesis which gained honours at Edinburgh University. The greater part of the book—142 out of 169 pages—is taken up with a collection of over one hundred and fifty cases of obstinate hiccough, culled from the British Medical Journal, the Lancet, current foreign journals, reviews, and text-books on medicine. A case ending fatally which the writer met with is also described in detail, and the anatomy, physiology, and pathology of hiccough are discussed somewhat cursorily in three pages. Finally, there is appended a list of all the drugs and methods which have proved successful
in the treatment of this symptom, and this table, to a certain extent, serves as an index to the cases enumerated.

It cannot be said that any very fresh light is shed by Dr. Knuthsen on this malady, but it must be conceded that he has been successful in his endeavour to bring out the physiological treatment of obstinate hiccough in contradistinction to the unphysiological, and the work should prove eminently useful to anyone who is called on to treat this symptom in an aggravated form.

ABSTRACTS FROM CURRENT MEDICAL LITERATURE.

MEDICINE.

By WALTER K. HUNTER, M.D., D.Sc.,

AND

JOHN G. GRAY, M.D., F.F.P.S.G.

Acute Leukæmia. By Dr. J. B. Nichols (American Medicine, 23rd May, 1903).—This paper is a study of the symptomatology of acute leukæmia, and it is based on an analysis of all the cases—119 in number—published up to the end of the year 1902.

In the first place, it is made clear that there is no essential difference between acute and chronic leukæmia, the distinction between the two being one of degree rather than of kind. But the general characters of acute leukæmia, the intensity and virulence of the symptoms, and the rapidity of its course, would seem to make it a distinctive form, and one which contrasts in a striking manner with the more chronic type of the disease. No arbitrary time limit can be fixed as a dividing line between the two; but, while the chronic forms may last for two to three years, the acute rarely last more than three to six weeks, and in several cases the duration has been under ten days. Intermediate cases, difficult to classify, are to be found, just as in other diseases; but in the majority of instances the two types are sufficiently distinctive. It is to be noted, too, that the acute cases are almost exclusively of the lymphatic form; and, of all cases of leukæmia, it is estimated that one-tenth are acute cases. About three-fourths of the acute cases occur in those under 30 years of age, about one-fifth under 10 years, but most in the decade from 10 to 20 years. The youngest case reported was born with the symptoms of the disease, and died when 19 days old. The males affected outnumber the females by two or three to one.

The disease usually begins with a feeling of malaise, weakness, and general indisposition; but the most common initial symptom of the disease proper seems to be haemorrhage into the subcutaneous tissues or from the mouth or nose. Leukæmias at this stage are not infrequently diagnosed as cases of purpura haemorrhagica. Stomatitis and pharyngitis are likewise early symptoms. Fever is usually present, moderate in degree and irregular in type, and perspiration is apt to be abundant. The skin is pale and anaemic, and there is often some oedema of the face and of the lower limbs. Progressive asthenia is a marked symptom. The progress of the disease is, as a rule,