paralysis. He recommended the sigmoidoscope as an aid in the diagnosis of tumours in the rectum and sigmoid. In very acute obstruction Paul's or Moynihan's tube was advised to drain the bowel previous to a radical operation. Since this had been adopted the mortality had greatly diminished. Where caecostomy required to be done, the method recommended by Kader for the stomach had been found useful, as a valve was formed which prevented leakage of liquid faeces. He strongly recommended eserine salicylate and pituitary gland for paralysis of the bowel. In the last 33 cases which he had operated on there were three deaths, which was encouraging, and if the operations were carried out early in every case the mortality ought to be less.

III.—THE ADULTERATION OF FOOD STUFFS AND ITS INFLUENCE ON DIGESTION.

By Dr. William Watson.

Dr. Watson's paper was published as an original article in the June number of the Glasgow Medical Journal.

REVIEWS.

Minor Maladies and Their Treatment. By Leonard Williams, M.D., M.R.C.P. Third Edition. London: Baillière, Tindall & Cox. 1913.

Dr. Leonard Williams' object in gathering these lectures, delivered at the Medical Graduates' College and Polyclinic, into the present volume has been to supply in an accessible form detailed information on subjects with which the ordinary text-book necessarily deals in a cursory manner—colds, coughs, and sore throats; indigestion; constipation, diarrhoea, vomiting, and giddiness; rheumatism, neuralgia, headache; goutiness; change of air; general health; some drugs and their uses; and insanity.

This is a most interesting and instructive work, which from beginning to end is personal, supplying with conviction
just that enlightenment we desire, and which we so frequently consult our books for in vain. The newly-qualified medical man, by making Dr. L. Williams' wide experience his own, will acquire what otherwise might take him a lifetime to accumulate; and he will learn that the comprehension and treatment of the commonplace can be not only most fascinating occupations, but even the means of preventing those malignant maladies, which alone seem capable of exciting youthful enthusiasm. To the older, and even elderly, practitioner this volume will come as a great joy, for it solves in a masterly fashion those very problems that confront him daily, confirms his convictions, supplies the stimulus needed to encourage perseverance in certain lines of treatment, points out much that he has overlooked, and makes plain to him many things that he has hitherto but imperfectly understood. This is a book that counts.

_Glycosuria and Allied Conditions._ By P. J. CAMMIDGE, M.D. London: Edward Arnold. 1913.

The reputation of the author in the field of clinical chemistry stands very high, and deservedly so, and the present production amply sustains that reputation. No such exhaustive treatise on this important subject has ever before appeared, in the English language at all events, and clinicians in all departments of medicine and surgery will welcome Dr. Cammidge's work. At the same time one is tempted to conjecture when, if ever, the process of minute specialisation will fall within the limits of even the most conscientious member of the profession. Here we have nearly 500 pages (med. 8vo) devoted to only a small part of urinary analysis, and conceivably the same extended treatment might be rationally applied to all the other parts of such analysis. The time seems coming when such diverse ramifications must be supplied in "tabloid" form, otherwise the traveller may be lost in the thick jungle of obscurity.

Nothing, however, can alter the fact that in the present book the subject of glycosuria and similar conditions receives most careful and minute consideration, and as a reference book it has no equal.

For practical workers there is one defect. Many forms of apparatus are described in the text, but there is not a single illustration of any kind. At the present day this is a defect which cannot be excused even on the score of added expense,
and at the published price of sixteen shillings a few diagrams and illustrations would have greatly enhanced the value of the book to the ordinary reader.

In the preface Dr. Cammidge points out that, with the exception of dextrose, the carbohydrates found in the urine in diabetes have received but little attention at the hands of clinicians, and that investigation of the other carbohydrates present—lactose, maltose, pentose, &c.—may throw light upon the pathology of the condition.

The first chapter is concerned with the classification and properties of the carbohydrates and their derivatives. In a general way these fall into three groups—(1) The simple sugars or monosaccharides; (2) the invertible sugars or disaccharides; and (3) the colloidal or non-crystallisable polysaccharides. In the monosaccharid group the most important form is that with the molecule containing six carbon atoms, the hexoses; and in actual practice the clinically important sugars in this group are dextrose, levulose, galactose, and mannose. The chemical and physical properties of these are given in detail. Similar remarks apply to the disaccharid group—sucrose, maltose, and lactose. The polysaccharides are relatively unimportant in the investigation of glycosuric conditions, but the methods by which these are converted into soluble and assimilable sugars in the body are of importance, and these methods are given in detail, stage by stage.

The presence of more than traces of sugar in the normal circulating blood is referred to, and the discrepancy in the results of estimation in this case by reduction methods and polarimetric methods is pointed out clearly. Similarly, pentose is found to be a normal constituent of the blood, while as to glycogen the author is of opinion that this substance, when found free in the blood plasma, is derived from the leucocytes, and is not normally free in the fluid part of the blood.

With regard to the presence of sugar in "normal" urine, it has been pointed out by Johnson that the definition of what is a normal urine is not easy; in spite of this, however, it seems probable that the urine of many perfectly healthy individuals contains traces of glucose and other reducing carbohydrates. This does not, however, assume the constant presence of these reducing sugars. In taking samples of urine for examination for sugar, it is pointed out that this sample should, preferably, be an evening sample, as in not a few cases the tests will only be positive with urine thus
obtained. Of course, where sugar is present in quantity, and quantitative estimation is required, the conditions are different. Further, care should be taken that the urine does not stand longer than is absolutely necessary, as minute traces of sugar may easily be destroyed by spontaneous fermentation.

Our present-day methods for the detection of sugar in urine are apparently very far in advance of those in China, for example, where it appears that the method is to allow the urine to evaporate on the ground in the sun and watch for the concourse of ants and other insects attracted by the sweet residue.

The various qualitative tests for sugar in urine are given in detail, and the precautions necessary to obviate fallacy are also pointed out. In dealing with Fehling’s test a method is described (page 31) which, by avoiding a temperature higher than 60° to 70° C., eliminates reduction from constituents of the urine other than sugars. This is important; indeed, the whole performance of Fehling’s test is so often done in a slovenly manner that the author is to be thanked for his endeavour to lay down a uniform method for its performance. The removal of albumen, excess of urates, and the reduction of a high specific gravity by the addition of distilled water, are essentially the points here which strike the clinical pathologist as important. Three distinct modifications of Fehling’s test are described which have for their object the avoidance of error due to reducing substances other than sugars in the urine. In the same way several methods have been suggested to overcome the instability of the solutions, even when kept separate, of Fehling’s solution. In Haine’s modification glycerine is employed in place of Rochelle salt, but the author makes no mention of the fact that glycerine is itself a reducing agent under certain circumstances, so that its use should be deprecated. On the other hand, Benedict’s modification seems free from any objections, and deserves extended trial in clinical laboratories; the author now relies upon it alone as a preliminary test in all cases. Crismer’s safranin test appears to be almost too delicate for ordinary routine work, resembling in this respect Marsh’s arsenic test. The phenylhydrazin test, giving osazone crystals in urines containing anything over a mere trace of sugar, is one of the best recent tests, but the time, skill, and microscopical manipulation required for its proper performance are so great that its practical value is greatly impaired.
Among "classifying tests" the author gives five methods, but in practice the fermentation test is at once the most readily applied and the most valuable in clinical work. The polariscopic results are of minor value owing to the presence of sugars and other substances having opposite rotatory powers on the ray of polarised light. Under "confirmatory" or "special" tests the author gives a number of methods which are of considerable value where doubt exists as to the exact nature of the sugar present.

Dealing with the quantitative methods of estimating sugar in urine, the author gives a fairly complete list; but although Gerrard's method is given, there is no indication of the modification by Rudish Celler, which overcomes the objections to the poisonous fumes evolved in the Gerrard process. Dealing with gravimetric methods of estimation, the difficulty of accurate weighing and the time spent in the process are objections which have not been given their proper weight; for clinical purposes the volumetric method is certainly the best. The only gravimetric method of any clinical value is the differential density method of Robert's, i.e., the difference in the specific gravity of the urine before and after fermentation, and essentially this is almost a volumetric method in its actual working, inasmuch as there is no weighing at any stage. The quantitative methods for the estimation of the more rarely occurring sugars are also fully described.

The chapters on experimental, transitory, and persistent glycosuria are full and well put. Naturally, the last named demands great prominence, and, in fact, it receives almost 200 pages, or almost half the entire text. The subject of transitory glycosuria is one, however, which is of much importance, to those especially who have to deal with life insurance matters, and this chapter will be found of very great value in this respect.

The remaining chapters, dealing with the rarer forms of reducing matters in urine—levulosuria, maltosuria, lactosuria, galactosuria, saccharosuria, pentosuria, glyceuronic acid, alkaptonuria—are essential in a work of this kind, and much informative matter will be found in this section in cases where the sugar is not entirely dextrose. Diabetes insipidus also receives a few pages of detailed notice.

The appendix contains a number of technical details and explanations, which have been properly kept apart from the subject-matter of the general pages.

There is a copious bibliography at the end of each chapter.
The author's "pancreatic reaction" in the urine in cases of "pancreatic diabetes" naturally gets considerable prominence and a full description, and a recently devised quantitative pancreatic reaction is given on p. 275. The true value of this test is still to some extent speculative, but the constant accumulation of evidence will in time enable it to take its proper place in the chemical methods of investigation.

No up-to-date clinician can afford to be without Dr. Cammidge's book.

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**Clinical Bacteriology and Haematology for Practitioners.**
By W. D'Este Emery, M.D., D.Sc. Fourth Edition. London: H. K. Lewis. 1912.

The valuable work of Dr. W. D'Este Emery is now so well known that but few words of commendation are necessary in introducing its fourth edition. The author tells us in his preface that the alterations which have been called for are alterations chiefly of detail; but he has added a section on the Wassermann reaction which should aid the practitioner in his interpretation of its results. Investigation of the volume reveals that it forms, as heretofore, a guide to the methods of clinical bacteriology and of the examination of the blood which is complete, authoritative, and, above all, practical. It supplies precisely the information which enables the practitioner to perform for himself many investigations in which he would otherwise need expert assistance, and it gives him the means of forming an accurate judgment of the value of his results. It is to be warmly recommended to all scientific practitioners.

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**Saint Thomas's Hospital Reports.** New Series. Edited by Dr. J. J. Perkins and Mr. A. C. Ballance. Vol. XXXIX. London: J. & A. Churchill. 1912.

The thirty-ninth volume of these Reports contains, in statistical and tabular form, full information with regard to all the cases treated during the year 1910, both in the general wards of the hospital and in the special departments; an analysis of the surgical and gynaecological operations; a report by Mr. C. M. Page on the results of suprapubic cystotomy from 1906 to 1910, from which it appears that the
average mortality-rate was 14·2 per cent; a list of additions to the pathological museum; and a report by Dr. Athole Ross upon the cases treated by bacterial vaccines. These, it would seem, have been used almost exclusively in surgical cases; and the chief feature of interest in the report is Dr. Ross's warm eulogy of the use of vaccines in cases of acute bone disease (periostitis and osteomyelitis) due to infection by the staphylococcus aureus. The volume contains much information that will be of value to the hospital statistician.

**Massage and the Original Swedish Movements: their Application to various Diseases of the Body.** By Kurre W. Ostrom. Seventh Edition. London: H. K. Lewis. 1912.

Mr. Ostrom's work, the popularity of which is sufficiently attested by the number of editions through which it has passed, is the outcome of a series of lectures delivered to various nursing institutions. It is therefore in the first place practical, and it gives a very complete and adequately illustrated account of the various operations of massage and of the different forms of Swedish movements, which is followed by a discussion of their applicability to the diseases of different regions of the body, with indications for the selection of the movements appropriate to each case. Physiological and anatomical considerations are but little dwelt on, but their treatment is probably sufficient in view of the aims of the book. Although not a complete text-book of massage, it will be found useful by anyone desirous of acquiring a working familiarity with its manipulative methods.

**Occasional Papers on the Prevention of some Common Diseases in Childhood.** By J. Sim Wallace, D.Sc., M.D., L.D.S. London: Baillière, Tindall & Cox. 1912.

The nine short papers comprising this small volume have already appeared in various medical and dental journals, but their presentation in this form will, it is hoped, lead to a wider recognition of the importance of the views therein expressed. The prevention of oral sepsis is the main theme. Not heredity but unsuitable diet is the cause of dental caries.
Having attained the age of 9 months the child should have solid food of a kind that it can gnaw, in addition to its milk diet, and at 2½ years it should have the same kind of food as adults—three meals a day and nothing between. The meals should not end with fermentable carbohydrates such as jam, milk puddings, or food with much sugar, or, if these are given, they should be followed by fresh fruit.

One of the papers is on the diet of school children, another on the need of reform in feeding at schools. Attention is directed to the fact that there is no instruction of the medical student in elementary odontology. Cold, damp night air is said to be an exciting cause of adenoids, and open windows under such conditions are a mistake.

There is a certain degree of immunity acquired to ubiquitous diseases, the author suggests, by means of the bacterial flora of the mouth—an important reason for promoting oral hygiene. The importance of oral and alimentary hygiene in the prevention of tuberculosis is the subject of a paper. In the concluding paper—on infant mortality and milk—it is pointed out that milk diet during lactation is not conducive to either oral or alimentary hygiene, and milk-fed mothers seem less able to suckle their infants than those on ordinary diet.

There is a good deal of repetition, and of the truth of some at least of the author’s views there has long been recognition.

Surgical Operations: A Handbook for Students and Practitioners. By Professor Friedrich Pels-Leusden, of Berlin. Only authorised English Translation, by Paxton E. Gardner, M.D., New York. With 668 Illustrations. London: Rebman, Limited. 1912.

The aim of this work is to “link together” what the author has for long years brought to the attention of students in practical courses or theoretical lectures. While therefore it is particularly intended for students and general practitioners, the author hopes that the specialist may find in its pages many useful things. He frankly admits in the preface that he has not been able to rely on his own experience in the living subject for all the branches of surgery; but he has tested most methods on the cadaver and on animals, and he urges the beginner to seize all opportunities which he may have of operating on the cadaver or on dogs.
Reviews.

There is a good introductory chapter on antisepsis and asepsis, and this is followed by one on anaesthesia. Division and re-union of tissues is considered in a chapter in which are given details of incisions and suturing, the various methods of grafting, nerve suture, osteotomy, &c.

The surgery of the blood-vessels comprises haemostasis, temporary and permanent; treatment of wounds of blood-vessels, also the ligation of individual large arteries. Amputations and resections occupy considerable space, and are followed by descriptions of various operations on the extremities. Of these we may mention tapping of joints, exposure of bones and of nerves, tenotomy, and operations for talipes. The various regions of the body, head and neck, thorax, abdomen, genito-urinary organs, are then dealt with.

We have looked into various sections of the work, and perusal and inspection have shown us that it is carefully written. The author seems to have struck the happy medium between diffuseness and a too great conciseness, and the description of the different steps of the various operations is admirably aided by the illustrations with which the volume is well supplied. We would note further that the author has not confined himself to the actual technique of operations, but he gives valuable hints as to treatment.

There are in the market many works on operative surgery, and it is difficult to prophesy a success for any individual book. We feel, however, that the work before us is a sound one, and no one reading it and working by it is likely to go far wrong in his treatment of such surgical lesions as require operation.

X-Ray Diagnosis and Treatment: A Text-book for General Practitioners and Students. By W. J. S. Bythell, B.A. Cantab., M.D.Vict.; and A. E. Barclay, M.B. Cantab., M.R.C.S., L.R.C.P. London: Henry Frowde and Hodder & Stoughton. 1912.

The book consists of about 140 pages. In the preface the writers say that the book is not written for the x-ray specialist, their intention being rather to place in the hands of the general practitioner a guide which will enable him to know in what cases the x-rays may be of service in diagnosis or treatment. They refer to the practice still existing of having x-ray apparatus “neither worked by nor under the personal control of a medical man,” only to protest against it.
as productive of much harm; but they remind us that the
rays are just as potent for evil in the hands of a medical man
as in those of an electrician or porter, and that in this perhaps
more than in any other branch of medicine "a little learning
is a dangerous thing."
Emphasis is laid on the necessity of using the rays, not
instead of, but in conjunction with the old-established methods
of observation.
After an opening chapter on the x-rays and their use in
medicine, about one-third of the book is occupied by the
subjects—(1) Injuries of, (2) Diagnosis of, and (3) Examination
in Children of, the Bones and Joints.
On p. 26, speaking of the difficulty of the differential
diagnosis between malignant and benign bone cysts, we are
surprised to find the statement—"The proper course is to
take radiograms at intervals of a few weeks in order to
watch the behaviour of the growth, . . . and a certain
amount of information may sometimes be obtained in this
way, but a diagnosis cannot be made with any degree of
confidence in the absence of an exploratory incision." Surely
when malignancy is suspected the proper course is to get to
the exploratory incision at once, and not after weeks of
delay.
The book is a simple, well-written exposition of the subject,
and is copiously illustrated. The skiagrams are placed in
groups at the ends of the chapters, and great pains have
evidently been expended on their production. There is a full
index.

Hare-Lip and Cleft Palate, with Special Reference to the
Operative Treatment and its Results. By James Berry,
B.S.Lond., F.R.C.S., and T. Percy Legg, M.S.Lond., F.R.C.S.
London: J. & A. Churchill. 1912.

This book has been written with the purpose of describing
in full detail the methods that the authors have found most
useful in the treatment of hare-lip and cleft palate. The
contents, which extend to some three hundred and odd pages,
fall into various divisions. Two chapters are devoted to the
development, anatomy, and physiology of the lips and palate.
The varieties of hare-lip and cleft palate are grouped in a
third chapter, followed by one in which the functional results
of cleft palate are considered.
The details of treatment occupy about two-thirds of the
volume, and in an appendix of cases the authors furnish the results of their operations for cleft palate.

The development of the region is, on the whole, clearly set forth. In the section (p. 12, et seq.) dealing with the situation of the cleft in the alveolar process, however, there is a sense of scrappiness, and it is difficult in places to be sure whether the authors are expressing their own opinions or quoting in a condensed form the views of others. There is also in this section a good deal about clefts of the palate proper. The description of the muscles of the soft palate is good, but it might have been improved by the addition of a diagram.

In the introduction to the chapter on the varieties of hare-lip and cleft palate reference is made to the deformity sometimes described as "double lip," and examples are figured, but no mention is made of its nature. There is a very complete description of the varieties of hare-lip and cleft palate, followed by a chapter dealing with speech- production.

The authors give a good description of their methods of treatment of the various forms of hare-lip and cleft palate. They advise operating on hare-lip within the first few weeks of life. In the appendix of cases of cleft palate we observe that nearly 50 per cent of Mr. Berry's cases were operated upon under the age of 4 years. The operation which the authors recommend is that which is done, we believe, by the majority of surgeons, viz., freeing the muco-periosteum of the hard palate, separating the soft palate from the edge of the palate bones, rawing the edges of the cleft, and suturing. The authors' results confirm us in our belief as to the efficiency of this method.

This work should be in the hands of every operating surgeon. It is easily read and copiously illustrated, and is altogether a good presentment of the subject.

The Tea-habit in relation to Cancer. By Douglas Macmillan.

This forms No. II of the "Cancer Crusade Series," and is a penny pamphlet attempting unsuccessfully to connect cancer with tea-drinking. There is a recommendation of a certain tea which is "the result of many years of careful research on the part of its inventor," also of another preparation, which, when mixed with tea, gives "a reduction of 20 to 30 per cent
of the injurious tannin.” In the concluding paragraph there is a statement attributed to a Dr. J. Batty Duke—whose name does not appear in a recent issue of the Medical Directory—that “it is open to question whether the whisky bottle or the teapot exercises the more baneful influence.” The pamphlet may interest some faddists.

The First Annual Report and Year Book of the Society for the Prevention and Relief of Cancer.

The Report is for the year ending 31st December, 1912. The frontispiece is a reproduction from a photograph of the President of the Council, Robert Bell, M.D., F.R.F.P.S. The report of the secretary, Douglas Macmillan, is interesting reading to those who care to investigate statistical fallacies. The origin, constitution, and rules of the Society are given in full, and this is helpful, as otherwise certain persons might be misled by the name of the Society. At the end are a number of forms for subscriptions and donations. There is a short article in the pamphlet, by Charles W. Forward, entitled “The need for scientific method in cancer research,” and with the title of this article all will agree.

The Journal of Hygiene. Plague Supplement II.

This, which forms volume xii, is a continuation from volume xi, also dealing with plague investigations in India, a review of which appeared in our columns recently.

In the present number the first article deals with plague in Madras city. Singularly, although Madras is the third largest city in India, and contains over half a million population, cases of plague have been always relatively infrequent with the exception of an epidemic in 1905-1906. Examinations of rats and rat fleas of Madras city were carried out extensively, and the low rate of plague incidence is clearly not due to want of facilities for carriage by the rodents and parasites. Further, the passport system and its associated energetic sanitary administration appear to be partly responsible, at all events, for the comparative freedom from any real epidemic of plague in Madras in recent years.
The question of the acquired immunity of rats to plague received very exhaustive investigation at Poona, near Bombay, and the series of tables forms an interesting commentary on the thoroughness with which the investigation was carried out. In a general way it may be stated that the immunity was found to be greatest in places which had suffered most severely from plague, and least in those places where true epidemic plague had not occurred. Further, this immunity is not always acquired from an actual attack of plague, but is transmitted by the parent rats to their offspring which have not been exposed to infection.

An article follows on what is termed chronic or "resolving" plague. Here the results go to show that the lesions in this form are localised and confined for the most part to the spleen, and that in many cases it is not possible to isolate the bacillus from these lesions, although the bacillus can be found in a sufficient number of cases to prove the actual origin in many. There is one reservation here, and that is that very similar lesions can apparently be produced by other causes.

Two short articles on the experimental production of resolving plague and post-plague lesion follow. The article on the serum treatment of human plague is very interesting, but definite conclusions are hardly possible so far.

Other interesting articles are on the attempt to separate the antigen from the nucleoprotein of the plague bacillus by filtration through gelatin; Besredka's method of vaccination; observations of the mechanism of plague immunity, by Sydney Rowland; the opsonic index in plague vaccination, by Ralph St. John Brooks; and the preparation of antitoxic plague sera, by A. T. M'Conkey.

The Labyrinth: An Aid to the Study of Inflammation of the Internal Ear. By Alfred Braun, M.D., and Isidore Friesner, M.D. London: Rebman, Limited.

In this work an attempt has been made to deal with the internal ear from the point of view of the anatomist, the physiologist, the pathologist, and the surgeon. In many respects the attempt has been successful, but it must be admitted that there are some rather grave defects. So long as the writers are concerned with the generally
known anatomical facts, the descriptions are clear and concise, but many important facts concerning the minute anatomy of the structures are either not referred to at all or their significance is underestimated. Thus the increasing size and strength of the ligamentum spirale from apex to base of the cochlea is not pointed out, although it has a bearing upon all theories of hearing quite as important as the alterations in width of the basilar membrane.

In the physiological portion the discussion on the theories of hearing is very inadequate, as illustrated by the fact that the "theory of maximum amplitudes" is not even mentioned.

On p. 82 it is stated that "Helmholtz considered that each one of the fibres can vibrate independently of all the rest. Each fibre vibrates in harmony with a certain tone." On p. 83 it is stated—"In reality Helmholtz did not consider that each fibre vibrated with each tone, but that a group of fibres was set in vibration, the central fibre vibrating strongest, and the vibration gradually diminishing in the fibres on either side. The vibration of the central fibre is so much stronger than the others that the tone to which it corresponds predominates." In regard to these two statements it may be said that they are perfectly correct. The curious fact is that neither Helmholtz himself nor the writers of the present work see the incompatibility of the two statements in so far as they refer to Helmholtz's theory. If more than one fibre vibrates to each tone, and if each fibre when vibrating excites the sensation of a particular tone, then, when a single pure tone is sounded and conveyed to the cochlea, we should hear that tone strongly and a number of corresponding tones above and below it more freely. This is certainly not the case, and this fact alone is sufficient to render the Helmholtz theory of hearing untenable, apart from the consideration that other facts show its insufficiency.

The recognition of the relationship of the internal ear to sea-sickness is ascribed by the writers to Barany. This relationship was recognised by others before Barany.

It is unfortunate that the writers do not appear to have appreciated one of the important laws underlying all sensation, viz., that to evoke any given sensation the stimulus applied must be such that its intensity is constantly varying in degree.

The portion on methods of examination is a very good and exhaustive synopsis of this difficult subject. The only fault to be found is that the writers do not emphasise the fact
sufficiently that the ocular and other reflexes associated with the labyrinth vary enormously in perfectly normal individuals. It is this fact that takes away so much value from the nystagmus tests for practical purposes.

The pathological changes in labyrinthitis are described well. The subject is a difficult one for the obvious reason that in cases which recover no material can be had for study, and *post-mortem* examination of cases which have been observed during life is rarely obtainable.

The chapter on symptomatology, also, is very good, and deserves careful study, and the same may be said of the chapter on the treatment of labyrinthitis.

The unsatisfactory character of the anatomical and physiological portions of the book are redeemed by the chapters on symptomatology and treatment. The illustrations are fairly good.

*Marriage and Motherhood: a Wife's Handbook.* By Hugh S. Davidson, M.B., F.R.C.S.Ed. The People's Books. London and Edinburgh: T. C. & E. C. Jack.

It is no part of the purpose of this little book to over-emphasise the discomforts and dangers of pregnancy. The advice here given is sound, and could not very well be improved upon. We must, however, emphatically protest against the instruction on page 84, under the heading of "Deformities and diseases of the newly-born child"—"The nurse should pass either a thermometer or her little finger, well anointed with vaseline, into the bowel to make certain" that there is no obstruction.

*Our Baby.* By Mrs. Langton Hewer. Fourteenth Edition. Bristol: John Wright & Sons, Ltd. 1913.

This useful little book has enjoyed a well deserved popularity during the past twenty years, and can still be recommended as a reliable guide to mothers and nurses. The present edition is not a mere reprint, but has been carefully revised, the chapter on "Infant feeding" being well up to date, while useful information has been added on moral training, tuberculosis, and on the care of children born in the Tropics.