Edinburgh Hospital Reports. Edited by G. A. Gibson, M.D., D.Sc.; C. W. Cathcart, M.A., M.B.; John Thomson, M.D.; D. Berry Hart, M.D. Volume III. Edinburgh and London: Young J. Pentland. 1895.

This third volume of the Edinburgh Hospital Reports is a highly successful one. It contains the records of many of the most interesting cases in the Edinburgh Hospitals during the past year, as well as some original articles on various subjects, both in surgery and in medicine.

Of the aims of this book we cannot speak too highly, for by its means much useful knowledge is retained to the profession which might otherwise remain unpublished.

We can only notice a few of the forty-two articles contained in this work, and for the rest we refer our readers to the book itself.

The first articles are devoted to an account of the New Craig House at the Edinburgh Royal Asylum, the Deaconess Hospital, and the Victoria Hospital for Consumption. These all seem excellent institutions, but it is the new hospital for consumption which interests us the most. We are glad to see that the medical profession is at last recognising that tuberculous diseases are infectious, and that they should not be treated in the wards of a general hospital. So it is with much satisfaction that we hear of this charity in Edinburgh, and judging from the account before us, it must be most complete both in its outdoor as well as in its indoor departments.

We hope it will be the forerunner of many other similar institutions throughout the country, and we quite agree with Dr. Philip, in urging for something to be done for dying consumptives, when he says that "it is one of the most distressing aspects of our modern civilisation, that hundreds of such patients are still permitted to die inch by inch, through many months, untended, or nearly so, a source of grave danger to their helpless families, and even to the community at large. This is a question, as it seems to me, for our municipalities and county councils."

The next article is on Gastric Flatulence, by Dr. Wyllie, and like everything that comes from his pen, it is delightfully written and well worth reading. Flatulence due to the "introduction of atmospheric air" is a subject too little known, and therefore the present contribution, with the several cases described, is of special value. We note also the analogy drawn to the wind-sucking in horses.

There are two articles on Appendicitis. In one, Professor-
Annandale strongly urges the removal of the appendix in cases of intermittent appendicitis. He considers the operation to be attended with little risk, and that it removes a condition which may result in risk to the patient's life. The other article is on the association of Rheumatism to Appendicitis, and is written by Dr. Sutherland. It forms, as it were, a sequel to the paper by the same writer, in the Lancet for 24th August, 1895. The conclusions, however, we cannot yet accept. We cannot conclude that because the appendix, like the tonsil, contains lymphoid tissue, that it should, in the same way as the tonsil, be liable to inflammation in rheumatic subjects—even although the author has found six rheumatic subjects who were supposed to have appendicitis. The cases recorded, nevertheless, are well worthy of note, and in future we shall hope to have the matter cleared up.

Dirt Eating in Children, by Dr. John Thomson, should be read by those interested in diseases of children. In the same connection we may mention the article by Drs. Hutchison and Elder on the Movements of the Fontanelle in Children. In infants, the physician counts much on the condition of the fontanelle as regards indications to treatment, and we recommend this paper for consideration.

We must also mention a very excellent paper "On the Characteristic Modes of Fatal Terminations in Multiple Neuritis," by Dr. Gibson and Dr. Fleming. The case here described is of great interest, and the thoroughness with which the microscopic examination of the nerves was carried out is worthy of much praise. We hope to hear more on this subject from the same writers at some other time.

Dr. Byrom Bramwell has a paper on the Thyroid Treatment of Myxœdema and Cretinism, viewed from the clinical aspect. The cases are well reported, and form a very complete series. It would have been of interest if a more careful examination of the blood had been made before and after treatment. Some of the French writers have described nucleated red blood corpuscles as being found in cases of myxœdema. These corpuscles, they say, disappear with thyroid treatment. We ourselves have never found these corpuscles in the few cases we have examined.

Dr. Bruce's article on the use of the Thyroid Gland in Insanity is also a useful contribution to the therapeutics of this drug. The results obtained are very encouraging.

The Clinical Study in Diabetes, by Dr. Ramsay Smith, we do not quite appreciate. Neither of the cases recorded seems...
to us to have been a case of diabetes, for in neither was the quantity of urine increased.

There are many other papers of much interest which, however, we have not space to notice. We shall conclude, therefore, by offering our congratulations to the editors, and in wishing success to the third volume of the *Edinburgh Hospital Reports*.

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The *Extra Pharmacopoeia*. By WM. MARTINDALE, F.C.S., and W. WYNN WESCOTT, M.B. Eighth Edition. London: H. K. Lewis. 1895.

The value and convenience of Messrs. Martindale and Wescott's work has been so widely recognised that, in noting the issue of an eighth edition, it is scarcely necessary for us to do more than express our appreciation of the thoroughness which characterises the entire volume, and of the complete success which has attended the effort to bring the information fully up to date. For example, the practitioner will find exactly the information he needs in the new chapter on Antitoxins, Serums, and Lymphs; and the same remark must be made about the chapter on Animal Glands and Tissues as Therapeutic Agents. In the present issue, too, Mr. Martindale has included his analysis of the medicines ordered in 25,000 prescriptions collected from various parts of the United Kingdom and Colonies. We trust the results will engage the careful attention of the Committee occupied with the revision of the *British Pharmacopoeia*, but for really accurate conclusions, a still more detailed set of observations is in our opinion necessary. Thus, it can scarcely be claimed that the selection of remedies by the profession in Scotland is adequately indicated by the analysis of 2,000 prescriptions as presented at a single pharmacy in Aberdeen. Mr. Martindale's table is an interesting study, and is a move in the right direction, but it cannot be said that it fully represents the prescribing habits of the profession in the United Kingdom, and therefore it ought not to be used as a safe criterion by which to determine deletions from the official volume. If, however, the range of observation were increased, we believe that the facts so obtained would form the best basis upon which the construction of the national Pharmacopoeia could be placed. A volume constructed on this principle could always offer to the pharmacist a uniform and correct interpretation of the medicines ordered by the physician, which we regard as the