It is scarcely necessary to say that the expression social diseases is here used to indicate the venereal diseases, and, in particular, gonorrhoea and syphilis. The appalling ravages of gonorrhoea among the innocent female section of society are only now coming to be recognised by the medical profession, and it is highly desirable that practitioners should warn men who consult them with regard to what the patients look upon as a trifling disorder, which makes a fit subject for a joke, of the grave dangers they introduce into family life if they marry before being completely cured. To illustrate the importance of the subject we quote some of Dr. Morrow's facts, or at least figures. There is good reason to believe that gonorrhoea is more influential than syphilis as a depopulating agent. Janet, writing in 1902, asserts that from the social point of view gonorrhoea is a hundred times as important as syphilis, and he is disposed to think that, even more than tuberculosis, it is the pest of our age. Noeggerath estimates that of every thousand men married in New York, eight hundred have or have had gonorrhoea. Neisser considers gonorrhoea responsible for more than 45 per cent of involuntarily sterile marriages. Kehrer found that among eighty sterile marriages, forty-five were due to gonorrhoeal changes. But these figures relate to primary sterility, whereas the more characteristic effect is the production of secondary sterility. The birth-rate might be considerably higher than it is were it not for the absolute and the one-child types of sterility which result from gonorrhoea in the female. In addition to sterility, however, we have to reckon with the untold sufferings of women from endometritis, metritis, salpingitis, and peritonitis, involving in many cases protracted or permanent invalidism, surgical operations, and a fatal issue. According to Neisser there are in Germany alone at the present time 30,000 blind persons whose loss of sight is due to gonorrhoeal ophthalmia. The sterilising influence of gonorrhoeal changes in the male, and the protracted disablement caused by gonorrhoeal rheumatism, must also be borne
nor should we altogether forget the rarer but even more formidable consequences of this infection, such as myelitis and infective endocarditis.

Different observers put the proportion of sterile marriages in which the fault is due to the husband at from 17 to 25 per cent, and it must be remembered that in a large proportion of the remaining cases where the sterility is due to the wife, this condition is a result of gonorrhoea communicated to her by her husband.

The serious nature of syphilis as a depopulating agent is much better known than that of gonorrhoea, and need not be illustrated here. But it would give a false impression of Dr. Morrow's work if we simply indicated how urgently it teaches the devastating influence of gonorrhoea and syphilis from the point of view of society. The subject of professional secrecy is, of course, constantly emerging in connection with diseases of this nature, and it is to be noted that in Norway and Denmark, compulsory notification (the information being kept secret by the sanitary authorities) has proved to be a valuable measure by disclosing dangerous foci of contagion. In certain European countries it is already a serious offence against the law if an individual who knows that he is suffering from a contagious sexual disease exposes another person to the risk of contamination.

As might be anticipated, Dr. Morrow recognises the failure of state-regulation. No doubt this system is not wholly bad, since it tries to prevent young women from entering upon a life of shame, and to reform those who have already fallen, but these ameliorative agencies can be, and are conducted, where no state-regulation exists; and the latter has little or no influence upon the widespread system of clandestine prostitution which, in Continental countries where regulation exists, is the most dangerous means of spreading diseases of this class. The medical profession, as a whole, is slow in assimilating the teaching of those who, in different countries, have been led by a thorough study of the subject to recognise that state-regulation of vice does not prevent the transmission of venereal disease. Its fatal defect is that it ignores the masculine spreader of the contagion; it assumes that the woman is the chief offender and the responsible cause. The essential cause of prostitution is "masculine unchastity—the polygamous proclivities and practice of the male;" and "the chief contributory cause is that false social code of morals" which readily condones in the man what it regards as unpardonable in the woman. Yet a great English writer, in one
of his delightful studies of women, tells us that probably one of the last things to be civilised by man will be woman.

We strongly recommend all medical men to study Dr. Morrow's book. The style, though diffuse, is eminently readable; and the subject, which is of the utmost importance, is discussed in a truly laudable manner, though no doubt in somewhat exaggerated language.

A Manual of General Pathology for Students. By Sidney Martin, M.D., F.R.S., F.R.C.P. With Numerous Woodcuts from Microphotographs and a Coloured Plate. London: John Murray. 1904.

The present volume is based on the lectures which the author has delivered during the past half-dozen years at University College, London, and is intended to furnish the medical student with as much general pathology as he requires for his professional training. The first chapter is on inflammation, and alludes to kindred subjects, such as repair and phagocytosis. The second chapter treats of fever, with its phenomena and causes. In the third chapter we are introduced to the subject of infection, and after getting a short account of hyphomycetes and blastomycetes, proceed to the consideration of schizomycetes or bacteria. The characters of the microbes which cause specific fevers are arranged in tabular form, and information is supplied as to artificial cultivation, relations to oxygen and sunlight, and variability in virulence. The fourth chapter deals with the chemical products of bacteria, such as nitrites, putrefactive products, ptomaines, intracellular and extracellular poisons, albumoses, &c. The products of certain individual bacteria are considered, including those of the bacillus anthracis, bacillus diphtheriae, bacillus tetani, bacillus typhosus, bacillus coli communis, bacillus tuberculosis, bacillus mallei, and vibrio cholerae Asiaticæ. It is suggested that the toxins and intracellular poisons are of the nature of ferments. We notice that on p. 70, the souring of milk is attributed to the bacillus acidi lactici, whereas on p. 52 we are told that a hyphomycete, the oidium lactis, is "the cause" of that phenomenon. Among the subjects taken up in the fifth chapter are the proofs, sources, modes and course of infection; mixed infections; and various infections occurring in man, including anthrax, pyogenic infections, infective endocarditis, septicæmia, tuberculosis, syphilis, intestinal diseases, and malaria. Malignant growths also receive consideration.
The sixth chapter treats in considerable detail the difficult question of immunity, the factors in immunity, the different kinds of immunity, the immunity produced by various pathogenic organisms and their poisons, the blood and tissues in immunity; and the prevailing theories of immunity are here brought under review. The following chapter contains matter of a simple kind; it deals with the different kinds of degeneration, necrosis and regeneration. Changes in the circulation and circulatory organs are next considered, and then the changes in respiration in disease. Chapters XI, XII, and XIII are devoted to changes in the blood. Chapters XV, XVI, and XVII treat of the liver, kidneys, and ductless glands. The subject of metabolism is discussed in Chapter XVIII, while the XIXth and concluding chapter is devoted to the nervous system.

This work is an able and interesting one, but the different sections are not well balanced. Those parts of the subject to which the writer has given special attention, such as the various aspects of the question of immunity, are discussed at length, and even, it may be said, with undue detail, whereas other parts are dismissed with too scant attention. We can scarcely recommend the volume as a text-book for the ordinary medical student, but advanced students and teachers will find much that is valuable in it. The illustrations are numerous and useful. So far as we have noted, in the acknowledgment of figures borrowed from Kirkes' Physiology, the apostrophe is invariably misplaced, a mistake for which the printer cannot be held responsible.

Clinical Treatises on the Pathology and Therapy of Disorders of Metabolism and Nutrition. By Professor Dr. Carl von Noorden. Part IV: The Acid Autointoxications. Authorised American Edition. New York: E. B. Treat & Co. 1903.

The present treatise, we should say, is at least as good as any of its predecessors—the volumes on obesity, nephritis, and colitis—and will prove very acceptable to scientific physicians. Practically speaking, the autointoxications considered here are those due to the acetone bodies, viz., acetone itself, diacetic acid, and $\beta$-oxybutyric acid. The three are so closely allied that it is usually sufficient to consider them collectively. The first chapter deals in a general way with the subject of autointoxication by acid products of metabolism.
The second chapter is on the sources of the acetone bodies; and as part of it is devoted to disproved theories as to their origin, it will be understood that there is a certain amount of discursiveness and tough reading in the earlier part of the book. Chapter III is on the question of the place of origin of the acetone bodies; this is concluded to be intracellular and not intestinal. In Chapter IV we have an important discussion on pathological non-diabetic acetonurias. The latter parts of the treatise interest us more on account of their practical character. Thus, Chapter V, on diabetic acidosis, touches on the danger of feeding diabetics too strictly; and Chapter VI, on therapeutic considerations, points out methods of combating acidosis, describes von Noorden’s oatmeal cure, and gives directions for the administration of alkalies and for the treatment of diabetic coma. Altogether this little volume is an interesting and important contribution to modern scientific medicine.

Operative Surgery. By Herbert Wm. Allingham, F.R.C.S. London: Baillière, Tindall & Cox. 1903.

This book is a valuable one for the student who wishes well-compressed yet suitable fare, and it has fewer of the defects than are commonly found in the average handbook of the condensed type so much sought after by the man who is working mainly with a view to his examination. It has not, in its compression, lost the quality of readableness, and that, after all, is refreshing. Further, the illustrations are copious, and, speaking generally, they are exceedingly effective. They are mostly rough sketches with little artistic pretension. This is, in the experience of most teachers, rather an advantage than otherwise. The most telling pictures, as far as the instruction of the student goes, are those which have more of the diagrammatic than of the artistic in them. Mr. Allingham’s most effective illustrations are those—and they form a preponderating proportion of the whole—which are purely diagrammatic.

It is unfortunate that it should be necessary to cavil at anything in a work which merits, for its general plan and execution, a cordial reception by the profession, and yet it is impossible to pass over without remark the somewhat numerous defects in description, nomenclature, and reference.

On page 81 the anatomy of the popliteal artery is shown in a rough sketch. In this the internal popliteal nerve and the popliteal vein are shown distinctly external to the artery. On the page opposite both nerve and vein are stated to occupy a
position to the inner side of the artery. Both cannot be correct. On page 62, speaking of amputation of the arm through the shoulder-joint by "external flap only," Mr. Allingham says, "here there is practically no inferior flap." We suppose he really means "internal" and not "inferior." The name of Kocher is in more than one place spelled Kocker. Surely that is not intentional.

Under the heading "Operations on the Prostate," Mr. Allingham speaks of "prostatotomy" and "prostatectomy" as the two chief procedures. But on reading the description of "prostatotomy" we find it is really a partial "prostatectomy," for we are told that it "consists of removing the obstructing lobe by means of a specially designed electrode passed per urethrum," &c. We cannot commend a looseness in nomenclature such as this.

The most glaring error—for it cannot be otherwise described—is in the description of Macewen's operation of supracondyloid osteotomy for knock-knee. Here it is stated—"At a point a finger's breadth above, and half an inch in front of the adductor tubercle an incision about an inch long is made down to the bone. A chisel or saw is next introduced and the bone partly divided and fractured."

It is practically certain that any surgeon following such a course will, in all but the very slightest degrees of knock-knee, drive his saw or chisel right into the epiphyseal plate, which, it must be remembered, is set obliquely in such cases. That would certainly be bad surgery, and almost inevitably lead to disaster in the way of interference with bone growth. Besides, the bone is at that level much too broad to be easily severed by chisel or saw, even supplemented by manual force. The incision, as well as the level of bone severance, ought to be at a distinctly higher level. Macewen's own direction is, "a sharp-pointed scalpel is introduced on the inside of the thigh; at a point where the two following lines meet, one drawn transversely a finger's breadth above the superior tip of the external condyle, and a longitudinal one drawn half an inch in front of the adductor magnus tendon." The italics are ours.

The adductor tubercle is not the guide to the level of the incision.

An operation described under the name of any surgeon should be given as put forward, or as modified, by that surgeon, and in no other way.

The chapter on operations on the head and brain is perhaps the least satisfactory part of the book.
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Probably the most useful portions of the whole work are the memoranda added to the descriptions of many of the operations described. They are of considerable practical value, and "give hints which it has been found from personal experience facilitate their performance."

While we have already spoken well of Mr. Allingham's book, and recommended it to a considerable number of students of surgery, we very much hope that the author will take an early opportunity to correct the errors of description and nomenclature which its present issue presents.

Aids to Surgery. By Joseph Cunning, M.B., B.S., F.R.C.S. Eng. London: Baillière, Tindall & Cox. 1904.

The "Aids" series of booklets produced by Baillière, Tindall & Cox is rendered more complete by the publication of this one.

"Intended," as the writer frankly states, "as a help for students preparing for examinations," it no doubt adequately fulfils its object. The author acknowledges his indebtedness to the manual of Rose and Carless and the works of Cheyne and Burghard and Bland-Sutton ("Tumours, Innocent and Malignant"), his general arrangement of the subject following closely that of Rose and Carless.

Without entering into the question of the effects, for good or ill, upon the mind of the student of the average "cram book," it must be admitted that, of its kind, the one before us is specially satisfactory.

It is clearly written, carefully systematised, and still interesting enough. Indeed, we almost feel that it more than fulfils the object set before him by its author. It is quite readable, and may be of interest and value to students of a larger growth, with examinations already behind them.

"First Aid" to the Injured and Sick. By F. J. Warwick, B.A., M.B. Cantab., M.R.C.S., L.S.A., and A. C. Tunstall, M.D., F.R.C.S. Ed. Third and Revised Edition. Bristol: John Wright & Co. 1903.

The success of the first two editions of this work amply explains the early appearance of the third edition. The latter
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has been very materially improved by the addition of a considerable number of illustrations and by the alteration of many others. There have also been made a number of minor changes in the text. As now issued, this book seems to embody in a most satisfactory fashion, at once concise and interesting, almost all that can be said to be within the province of the lay reader or ambulance pupil. It is now one of the most satisfactory of all the text-books on "First Aid" with which we are acquainted.

Practical Guide to Surgical Bandaging and Dressings. By W. Johnson Smith, F.R.C.S. London: The Scientific Press, Limited. 1903.

This very small book of 167 pages is intended as a kind of pocket-book for junior students and nurses in surgical wards. As such it is good enough in its way. It is small enough to go readily into even a pocket of straitened dimensions—it measures, in fact, 4$\frac{3}{4}$ inches by 3$\frac{1}{2}$ inches by half an inch. So far as we can see, however, it fills no gap in surgical literature which specially called for filling; there is little novel about it except its diminutive size. It is, nevertheless, somewhat profusely illustrated, and many of the figures, especially those of splints, are quite good. The first two figures in the book, reproduced from photo-micrographs of micro-organisms, are out of place in such a work, and might well have been omitted.

We fail to see what good end the production of this book can serve.

Die Technik der Lithotripsie. Vorlesungen von Prof. Felix Guyon. Mit Ermächtigung des Autors übersetzt und bearbeitet von Dr. Georg Berg, Frankfurt-a-M. Wiesbaden: Verlag von J. F. Bergmann. 1903.

This work is a German translation of essays by Guyon which appeared first in the Annales des Maladies des Organs Génito-Urinaires in 1899 and 1900. While not therefore new, the matter as now collected will prove of use to those interested in this department of surgery. The book is freely illustrated, and the figures convey to the reader a clear idea of the various steps in the technique of lithotripsy.
How to Take Care of a Consumptive. By M. Forrest Williams. London: John Long. 1903.

Written in simple language, this little guide may prove of some service to any intelligent lay person upon whom devolves the care of consumptive patients. Directions as to food, exercise, baths, massage, clothing, and ventilation are succinctly given. The general aim of the book is good, and the hygienic indications are sound, but the cry of the despairing consumptive will still be—"Here is the proper treatment laid down, but how am I to obtain it?"

Tuberculosis. By Norman Bridge, A.M., M.D. London: W. B. Saunders & Co. 1903.

The eighteen chapters of this book embody the most recent views as to pathology and treatment of pulmonary tuberculosis. Beginning with a description of the bacillus tuberculosis, the succeeding two chapters are devoted to the tuberculous process and the forms of tuberculosis. Chapter IV deals with the pathology of tuberculosis, and Chapter V with its etiology. Chapters VI, VII, and VIII are of particular value, and deal with the symptoms, physical signs, and diagnosis of the disease. The two following chapters deal with prognosis and prophylaxis. Chapters XI to XV deal with the various forms of treatment, and the concluding chapter discusses the question of sanatoria for tuberculosis. All who have in any way to deal with the disease will find much help in a close study of this work.

Portfolio of Dermochromes. By Professor Jacobi. English adaptation of Text by J. J. Pringle, M.B., F.R.C.P. Parts III and IV. London: Rebman, Limited. 1903.

In Part III of this Portfolio there are 30 plates, representing 52 figures. These are illustrative of different kinds of acne and eczema, area, chloasma, keloid, molluscum contagiosum, pediculosis, scabies, naevi, mycosis fungoides, Paget's disease of the nipple, pemphigus neonatorum, sarcoma cutis, scleroderma, sycosis, drug eruptions, rodent ulcer, warts, vitiligo, xanthoma, and xeroderma pigmentosum.

Part IV is devoted to venereal affections, and includes
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14 plates, which contain 27 figures, illustrating the various cutaneous manifestations of syphilis and also soft sores.

Taken along with the text, the plates of the Portfolio may be strongly recommended as a thorough and agreeable means of acquiring a good knowledge of diseases of the skin.

The Practical Study of Malaria and other Blood Parasites.
By J. W. W. Stephens, M.D.Cantab., D.P.H., and S. R. Christophers, M.B.Vict., I.M.S. London: Longmans, Green & Co. 1903.

This is an excellent manual for all who intend to work practically at the parasitic blood diseases of warm climates. The work begins with the preparation, fixing, and staining of blood films, and goes on to consider normal and abnormal blood. The malarial parasite is studied in detail, and great attention is given to mosquitoes in the different stages of their development. The hemamœbidæ, trypanosomata, and filariae are also considered. The numerous illustrations add much to the lucidity of the treatise, which is thoroughly practical in character, and packed full of valuable information and instruction.

Irregularities of the Teeth. By J. Sim Wallace, D.Sc., M.D., L.D.S. London: The Dental Manfg. Co., Ltd. 1904.

Dr. Wallace believes that irregularities of the teeth are in every case acquired characters. His view of their etiology is that insufficient development of the muscles of mastication, and especially of the tongue, from want of proper exercise, leads to a correlated imperfect development of the jaws and consequent irregularity of the teeth. He condemns the custom of feeding young children on soft pulpy food, which requires little or no chewing, and urges that a child's diet, as soon as it has teeth to masticate with, should be of such a nature as to compel mastication. Dr. Wallace states his ideas clearly and decidedly, and the book contains much that deserves study. The chapters on "Prevention of Irregularities" may be specified here, as they deal with a subject which, if the author's views are accepted, would clearly lie as much in the province of the medical as in that of the dental practitioner.
A Handbook of the Diseases of the Eye and their Treatment.
By Henry R. Swanzy, A.M., M.B., F.R.C.S.I. Eighth Edition. London: H. K. Lewis. 1904.

The fact of this new issue being the eighth edition of this text-book speaks volumes for its popularity and usefulness. It supplies what the general practitioner and the student wish to know about the eye without being overburdened with detail. It is neither too small nor too large for them, and this partly accounts for the popularity of this text-book. But, perhaps, its chief excellence is in its admirable clearness and conciseness, two qualities which are often lamentably wanting in medical text-books. Mr. Swanzy is to be commended for his admirable chapter on ocular diseases and symptoms in relationship to diseases of the brain and of the spinal cord.

Too little attention is given in text-books of ophthalmology to this important subject of the relationship of eye symptoms to medical diagnosis, and this excellent chapter on eye symptoms in relationship to disease of the nervous system is an example of the completeness of his text-book.

The volume is of a very handy size, and yet, by the absence of padding and the conciseness of style, it contains a very complete and up-to-date account of the various departments of ophthalmic science and practice. The book contains an admirable index, which greatly enhances its utility. This handbook will be found a safe and excellent guide for the student of medicine or the general practitioner who wishes to get a practical and up-to-date knowledge of the subject without being confused by an excess of detail. It is to be commended for its lucidity, its conciseness, and its completeness, which make it a peculiarly useful book for the student.

Praktischer Leitfaden der qualitativen und quantitativen Harnanalyse (nebst Analyse des Magensaftes) für Ärzte, Apotheker und Chemiker. Von Dr. Sigmund Fränkel. Mit 5 Tafeln. Wiesbaden: J. F. Bergmann, 1904; Glasgow: F. Bauermeister.

The author of this practical guide to the examination of the urine is a teacher of medical chemistry in the University of Vienna, and the book took origin in the notes which he drew up in connection with the courses he conducted in the University in the years 1896-1902. We can speak highly of the
volume. It strikes us as carefully prepared and lucidly arranged. Students cannot be expected to use it as long as it is available only in a foreign tongue, but to teachers we can heartily recommend it. We should prefer to carry out Fehling’s qualitative test for sugar in a manner slightly different from that described here. A few pages are devoted to the investigation of the stomach contents.

ABSTRACTS FROM CURRENT MEDICAL LITERATURE.

MEDICINE.

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

Case of Spleno-Myelogenous Leukæmia showing marked Improvement under the use of Roentgen Rays. By C. H. Weber (American Medicine, 21st May, 1904).—The patient was a woman, aged 53. Her symptoms began two years before with pain in the splenic region. Shortly after, the abdomen was noted to be enlarged; and there was progressive weakness, loss of appetite, headache, vertigo, and failing vision. On examination, the spleen was found to extend to within an inch of the crest of the ilium, and it was firm and tender to the touch. The liver was also enlarged, its lower edge being 2 inches below the costal margin. The examination of the blood was as follows:—Red corpuscles, 2,400,000; white corpuscles, 328,000; haemoglobin, 30 per cent. Of the white corpuscles, 40 per cent were polymorphonuclears, 40·8 per cent myelocytes, 13·3 per cent eosinophiles, 5·16 per cent lymphocytes. For the first month treatment was by means of arsenic, but at the end of that time there was but little improvement to note. For the next five months the Roentgen rays was the only form of treatment. It was given daily for fifteen minutes at a time, and focused over the splenic area. The result has been a progressive improvement in the general condition of the patient and in the blood—the blood, indeed, at the time of writing being practically normal, viz., red corpuscles, 4,720,000; white corpuscles, 7,200; haemoglobin, 72 per cent; differential count of white corpuscles—polynuclears, 73·6 per cent; lymphocytes, 23·8 per cent; eosinophiles, 2·6 per cent; no marrow cells. The spleen, too, lessened very much in size, its lower edge being now just below the costal margin.

Dr. Weber quotes three other cases where this treatment has also been successful, but as to whether or not the cure will be permanent time only will determine.

Family Periodic Paralysis: Seventeen Cases in Four Generations. By Geo. F. Holtzapple (American Medicine, 30th April, 1904).

Case I is a man, aged 68. His first attack of paralysis came on at the age of 14, and this attack, and those subsequent to it, all came on during the night. There were never any premonitory symptoms to be noted, for patient would retire feeling perfectly well, and wake up to find himself helpless. If the attack were severe, paralysis would be complete, except for the muscles of