

good results in many cases of both sarcoma and carcinoma. In some cases the patients have been greatly benefited by the treatment, and their lives have been certainly prolonged, if an entire cure has not been achieved. In the most successful cases the malignant growths have been entirely abated, no symptoms of their presence can be detected by the most rigorous examination, and the patients are in apparently perfect health. There has been no recurrence of the cancerous growth since the cessation of the treatment, although the time from the cessation of the treatment in the different cases ranges from seven months to three years. The reason that other practitioners have not been as successful and have not achieved such good results as I am able to report, can probably be traced to the fact either that the treatment has been slipshod or has not been sufficiently persisted in. All the cases which I have treated successfully have been pronounced inoperable by the best authorities in this and other cities, owing to the position of the malignant growths or other conditions. Several of the patients had been operated on previously, and came under my care at the hospital on a recurrence of the cancer. In cases where the toxin treatment was successful, the patients are now going about apparently in perfect health.

Dr. Coley then enumerated eight cases which had been treated by him with success. He detailed at length the condition of the patients when they came into his hands, the exact nature of the malignant growth from which they suffered, and the course of treatment pursued in each case. Six of Dr. Coley's patients who had been successfully treated—four women and two men—visited the hall, and the doctors subjected them to a rigorous inspection.—*Med. Rec.*

THE ANATOMY OF CARCINOMA UTERI.—Veit (*Central. fur Gyn.*) makes some important practical suggestions growing out of his more recent anatomical studies of this subject. He does not think that sufficient attention has been paid to the different varieties of cancer in the giving of a prognosis as regards recurrence after hysterectomy, nor is he inclined to agree with Winter in his statement that a considerable proportion of such recurrences are due to the infection of healthy raw surfaces during the operations. He divides cases of carcinoma of the cervix clinically into those in which the disease is situated in the portio or in the cervical canal, and in which it appears in a nodular form in the cervix, or, as disease of the corporeal endometrium. Primary nodules in the cervix originate in the connective-tissue, and are now regarded as endothelioma. As regards extension of the disease, the writer has often found cancer-cells in the lymphatics of the broad ligaments; when these infected vessels are divided during operation

it is natural to infer that they form foci, from which a rapid recurrence takes place. The latter form of recurrence is characterized by the fact that the metastatic deposits present the same histological structure as the primary disease, and that they rapidly invade the deeper tissues. The simultaneous appearance of two apparently independent primary cancerous nodules can usually be explained by referring the more deeply-seated one to secondary infection.—*Am. Jour. Med. Sci.*

EFFECT OF INFLUENZA ON THE FEMALE SEXUAL ORGANS.—Müller (*Munch. med. Woch.*) noted the condition of the pelvic organs in 157 cases of influenza, 21 women being pregnant. Of the latter 17 aborted. Of the non-gravid women all but three showed symptoms of uterine disturbance, either hæmorrhage or aggravation of previous troubles. Hæmorrhagic endometritis commonly developed, as in cholera, typhus, and other infectious diseases. After the decline of the disease the uterus was frequently found to be enlarged, and evidences of chronic endometritis were present, which seemed to be directly due to the influenza.—*Am. Jour. Med. Sci.*

A CASE OF TRISMUS AND TETANUS NEONATORUM.—Baginsky (*Berlin. klin. Woch.*) records a case under this title in a strong, well-nourished female infant nine days old, who had been ill for twenty-four hours. The case was submitted to antitoxin treatment according to the method of Behring and Kitasato, six injections being given over a period of four days. Death occurred upon the fifth day of the disease. Cultures of serum from the navel made on the second day of the disease showed the tetanus bacillus, and produced in a mouse typical tetanus and rapid death.—*Am. Jour. Med. Sci.*

PUERPERAL TETANUS TREATED BY TIZZONI'S ANTITOXIN.—In the *Deut. med. Woch.*, Walko describes a case of puerperal tetanus treated by antitoxin in von Jaksch's clinic at Prague. The treatment was unsuccessful, the patient receiving in all 18 injections, comprising 3 $\frac{1}{2}$ grammes. Well-marked leukocytosis developed after the second injection. As has been shown by Kitasato, tetanus bacilli could not be recognized. The clinical picture, however, of tetanus was a perfect one.—*Am. Jour. Med. Sci.*

THE DISINFECTION OF THE HANDS.—Reinicke contributes an article upon this subject to the *Archiv. fur Gyn.* He concludes from an elaborate series of experiments that the hands should first be cleansed with hot water and soap, and brushed for five minutes; then brushed from three to five minutes in 90 per cent. alcohol, and afterward in an aseptic fluid. The quickest method of disinfecting the hands consists in brushing them vigorously in alcohol for five minutes.—*Am. Jour. Med. Sci.*