

Résumé.

THE PATHOLOGY AND TREATMENT OF VENEREAL DISEASES. By FREEMAN J. BURNET, M. D.; Lecturer on Venereal Diseases at the College of Physicians and Surgeons, New York; Surgeon to St. Luke's Hospital, &c., &c. Philadelphia, Blanchard, and Lee, 686 pages, 8vo, \$3.75.

It is with feelings of no ordinary gratification that we rise from the perusal of this excellent work. Handled in such a masterly style, and containing as it professes, the results of all recent investigations upon this important subject, we became so interested and lost in the reading of it, that we completely forgot our duty as critic. It is well illustrated with wood engravings, and embraces complete treatises on gonorrhoea, soft chancre, and syphilis. The article on stricture alone occupies upwards of a hundred pages. We feel that we cannot do our author greater justice or recommend him more highly to our readers than by giving selections from one of his articles; we have taken them from the History of Venereal Diseases.

"The three diseases which from their origin in sexual intercourse have been denominated venereal, are gonorrhoea, soft chancre or chancroid, and syphilis. These affections for a long time confounded have been, since the commencement of the present century, gradually resuming the relations which they held to each other, nearly four hundred years ago. The medical mind has been travelling in a circle, and having completed the round is now where it stood in the last part of the fifteenth, and the first of the sixteenth century. A careful study of the older writers on medicine, will show that simple venereal ulcers have been known from the earliest times of which we have any record; that the hard chancre and its consequent constitutional symptoms, was first observed after the return of Columbus and his followers, from the discovery of America in 1493; and that for twenty or thirty years afterwards, the old and new ulcers on the genitals were never confounded; the duality of the chancrous virus is not, therefore, a modern discovery, but was familiar to those who witnessed the first irruption of syphilis into Europe. Previous to this time, gonorrhoea, chancre, buboes, and vegetations, were described as diseases requiring only local treatment; and up to this period, not the slightest allusion was ever made to symptoms consecutive to any diseases of the genital organs. And the physicians of this period, who were perfectly familiar with these simple affections, were struck with horror and amazement at the appearance of syphilis, confessing that they had never seen its like before, and that they were ignorant of its nature and treatment; and described it as the *new disease*, which commenced by indurated ulcers upon the genitals, that were speedily followed by eruptions over the whole body, and by frightful pains in the head and limbs. The two species of venereal ulcers occupied in their writings separate chapters, and even separate books. But the next generation of physicians not knowing, as those did who witnessed its first ravages, how to distinguish the symptoms by which the new disease commenced, from those which had no relation whatever to it, created all three diseases as syphilitic; giving mercury alike for the simplest balanitis, and the severest Hunterian chancre. The most admirable history of this age of confusion in venereal, is given by Bassereau, of Paris,

"1852; who has done more to unravel it than any other author."

In conclusion, we would say, that it is not sufficient to recommend the perusal of Humstead's work to every practitioner, but that it must be thoroughly studied, if we would keep pace with the times, on this important disease.

DIPHTHERIA IN VERMONT.—The ravages of diphtheria in the northern countries of the state, during the past year, were terrible. In Lyndon with a population of 1800, 150 died—nearly every case of diphtheria. Whole families were swept away.

FACIAL PALSY FROM OTRORRHOEA.—M. Triquet, who has written lately on diseases of the ear, says that Otrorrhoea frequently produces paralysis of the Portio Dura, by the penetration of the pus into the Aqueductus Fallopi, which causes inflammation of this nerve, and consequent facial palsy.

His treatment consists in giving Cod Liver Oil alternately with Iodine, and putting a few drops of the undiluted Tinct. of Iodine into the ear every other day. He also keeps up a constant issue in the mastoid region, and directs salt water baths three times a week, until relieved.

CULTIVATION OF SPONGE.—M. Lamiral, who for the past year has been residing on the coast of Syria, and paying special attention to the propagation of sponges, states that when the sponge is first gathered at the bottom of the sea, it is covered with a black but transparent gelatinous substance, resembling vegetable granulations, among which, by means of a microscope, may be detected white oviform larvae, which during the month of June and July, are washed off and attach themselves by means of cilia, to neighbouring rocks to become sponges. He has succeeded in conveying some of these mother sponges to France, and hopes to propagate them.

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ON THE APPLICATION OF LEECHES.

Addressed to young Students, by the Editor.

At the commencement of my career as a medical student, having observed a senior, whilst dressing in hospital, endeavouring to attach the tail of a leech to a patient's eye, I thought that at some future day, I would make it an apology for addressing a few practical remarks to beginners, on the application of leeches.

To know the head of a leech from its tail, put it down, when its head or biting end will be pushed forward first.

Leeches will not attach themselves where there is any close or disagreeable odour; and that of harshhorn or tobacco frequently kills them.

Before applying them, the skin must be very clean, and be cooled with a wet towel when red and inflamed.

To make them take, prick the skin with a lancet