

early recognition and proper treatment. Cancer is not always a hopeless incurable affection. The main thing to aim at is the education of the people so that they become alert to the early symptoms of the disease and seek advice in time. It is held that in this way the rate could be reduced by one-half or two-thirds.

It is with the view of spreading useful information that an organized effort is being made by the medical profession in many districts in the United States. On the list of those taking a leading part in this movement will be found such names as Drs. Robert Abbé, G. E. Armstrong, J. C. Bloodgood, G. E. Brewer, W. W. Chipman, H. C. Coe, W. T. Councilman, T. S. Cullen, James Ewing, J. R. Goffe, Howard Lillienthal, F. H. Martin, W. J. Mayo, W. L. Radman, J. H. Wainwright and many others, together with many prominent lay ladies and gentlemen. Dr. W. S. Brainbridge is taking a prominent part as a lecturer.

MILITARY SURGERY.

Henri Hartmann call (in *Paris Medical*) attention to the unexpectedly large proportion of wounds due to artillery projectiles in the European war; in a series of cases recently seen no less than 168 wounds had been due to artillery, compared to ninety-nine caused by rifle bullets. Under these conditions the treatment of the wounded has had to differ considerably from that advised by certain authors at the beginning of the war, stress being now laid on active preliminary surgical treatment, including dissection of infected tracts, removal of foreign bodies, and copious irrigation and drainage, as prerequisites in conservative surgery, i.e., in surgery which avoids complications and secondary mutilating procedures. Evidence of the prophylactic efficiency of anti-tetanic serum was obtained in a series of 311 cases of wounded soldiers, in whom no tetanus appeared except in two instances in which the preventive injection had been by error postponed until six and eight days after admission to the hospital. As regards gangrene with gas formation, Hartmann points out the fallacy of attempting to arrest the process by means of interstitial injections of hydrogen dioxide solution at the margins of the gas infiltrated tissue; the only rational treatment is to deal particularly with the initial focus, removing all foreign bodies there, freely separating and disinfecting the tissues, and even resorting to amputation where the entire thickness of the limb is involved. In dealing with wounds in general, Hartmann prefers irrigation with hydrogen dioxide solution or one in twenty phenol solution to the use of tincture of iodine. In badly infected wounds immersion in antiseptic fluids or the use of antiseptic sprays, is recommended. Radioscopic examination of all wounds is advised, immediate detection of fractures and metallic foreign bodies being thus rendered feasible.—*New York Medical Journal*.