POLYCYTHEMIA. By Dr. H. Senator, Berlin.

He said that an increase in the number of red blood cells can be either relative or absolute and can occur under both physiological and pathological circumstances. Physiological polycythemia is observed after the loss of much fluid from the body, after the ingestion of food rich in albumen, in convalescence from anemic disorders, in newly born infants, after residence in a strange climate, and perhaps in hibernating animals during the winter months. Pathological polycythemia is found when the blood becomes thickened during disease, in various forms of cyanosis, in certain intoxications and infections in which hemolysis takes place, and occasionally in diseases in which unknown changes in the blood occur, and in many affections of the nervous system. In all these pathological circumstances, in addition to the relative polycythemia due to a thickening of the blood, the diminution of the tension of oxygen in the blood must be considered as a casual factor, whereby the hematopoietic organs are stimulated to greater activity. These conditions must not be confused with polycythemia megalosplenica described by Vaquez, and polycythemia hypertonica described by Geisböck. In both of these a primary affection of the bone marrow must be taken to be the cause of the polycythemia. Geisböck's disease, of which very few examples have been recorded, may be distinguished from that of Vaquez by the fact that in the former there is a high blood pressure together with hypertrophy of the heart, and enlargement of the spleen cannot be demonstrated. The changes in the blood, which have been more especially studied in Vaquez's disease, consist in an increase in the viscosity of the blood and a higher specific gravity. The resistance of the erythrocytes does not appear to differ from the normal, whilst the capacity for the absorption of oxygen lies within the usual limits, or is increased. The respiratory exchange in many cases is found to be high. With regard to treatment, a vegetable diet and bleeding give favorable results. Many cases of primary polycythemia cannot be placed under either of these categories.

OBESITY. By Professor Carl von Noorden, Vienna.

He said that he should only consider the matter from the point of view of etiology. In the most common forms the condition is due either to over-feeding or lack of exercise; frequently these two causes are combined. It is quite easy to understand why excessive corpulence follows these two factors. It is much more difficult to explain those cases in which, although the proper amount of food is taken and sufficient exercise is indulged