

BOOK REVIEWS.

ENCYCLOPEDIA MEDICA.—VOL., III.—DIPHTHERIA TO FOOD.

Under the General Editorship of Chalmers Watson, M.B. Published by Wm. Green and Sons, Edinburgh. Canadian Agents, J. A. Carveth & Co, Toronto, Ont. Price \$5.00 per volume.

This volume is fully up to and in some respects surpasses in interest those which have preceded it.

The first article is one of 21 pages upon diphtheria. It is most valuable, being at once concise, complete, up-to-date, and most readable. Under Etiology, the views of Newsholme upon the influence of soil and climatic conditions are discussed, and generally supported. Under "modes of dissemination," the influences exerted by schools, and milk supply receive due attention, and the statement is made that no instance exists of diphtheria having been conveyed by the water supply. Under complications the various forms of paralysis are admirably stated and the analysis showing the frequency with which the different groups of muscles are involved is instructive and complete.

Three problems in the pathology of the disease are dealt with especially, viz., the acceptance of the Klebs Loeffler bacillus as the essential cause of diphtheria, the variation in the virulence of the bacillus, and the responsibility of associated organisms for such complications as adenitis, cellulitis, suppuration, etc.

As is to be expected, antitoxin is given at once the precedence and the chief place in treatment, as being "the most satisfactory method that is known." The cardinal rule is laid down—inject early. The remarks with regard to the dose deserve quotation in full:—

"If the treatment is commenced on the first day the dose should be 1,500 units at least; it will usually be unnecessary to give more than 2,000. But if it be delayed, the amount must be increased up to 8,000 or 10,000 units, according to the severity of the case. It is advisable to repeat from half to the whole first dose within twenty-four hours if the local exudation shows no signs of resolution. With respect to the total amount to be administered, though as far as the writer knows (and he has often injected from 30,000 to 50,000 units) the limit is set only by the volume of the serum that can with convenience be injected. Yet his experience leads him to say that little is to be gained by giving more than 16,000 units during the first twenty-four hours from the commencement of the treatment.

But, again, the earlier the treatment is begun, the less necessity will there be for large and repeated doses.

As the more concentrated sera are more expensive than the less concentrated, early treatment is more economical."