

"altruistic hypertrophy" in the sense of Hansemann than one of "altruistic atrophy."

One of the most recent advances in opotherapy is the feeding of ovarian substance as a substitution therapy in cases (1) where the ovaries have been removed at operation, and (2) at the climacteric to relieve the phenomena characteristic of that period. The substance is given in Germany in the form of Landau's oöphorin tablets. Loewy and Richter report that this ovarian substance has a remarkable capacity for increasing the oxygenating power of the blood cells in cases in which the ovaries have been removed. Their protocols are very convincing. Whether or not the therapy will be useful in preventing the obesity so characteristic of so many such cases we must wait to see, but the Germans feel confident that it will.

The advances along the lines of opotherapy are sufficiently indicated by the foregoing experiences. Physiology, experimental pathology, physiological chemistry, pharmacology and pharmacodynamics must lead the way.

In the struggle against infectious diseases a rapid extension of the powers of the physician is observable. The resistance of human beings as a whole is being increased not only by the slow method of natural selection, but by a more rapid mode through personal hygiene. Prophylactic inoculations have been multiplied since the work of Pasteur. The cholera inoculation, that for pest and that for typhoid are valuable. Flexner in Philadelphia is now experimenting with a prophylactic against the bacillus dysenteriae, so deadly in its effects in the Philippine Islands and Japan. The introduction of Behring's serum-therapy in diphtheria has undoubtedly greatly reduced the mortality of that disease; indeed, diphtheria is now scarcely a disease to be dreaded. Aside from the serum against diphtheria, however, there is as yet little of practical value to acknowledge from this side.

The antidiphtheric serum is an antitoxic serum. That introduced against tetanus is also an antitoxic serum. To be ranked with these two is probably also Calmette's serum against snake poison. Tetanus serum is only preventive, not curative, possibly owing to the fact that the antitoxine injected subcutaneously or into the blood cannot reach the toxine when once the latter has combined with the protoplasm of the nerve cells. Even intracerebral introduction of the antitoxine is not fully satisfactory for obvious reasons. All the other sera which have been introduced, namely, those against cholera, the streptococcus, pneumococcus, the bacilli of plague, anthrax and typhoid fever are not antitoxic sera but antibacterial sera. They do not neutralize the poison which the bacteria produce but have the power of killing the bacteria in the body of the patient and