

tory operations are justifiable: (1) Distinct modification of gastric chemistry, especially aepsia and the presence of lactic acid after a test meal. (2) Complete failure after careful dietary and medical treatment to keep the weight of the patient's body up to its normal weight, or to restore lost weight. Recent experience has shown that exploratory incision for that condition is void of danger, whilst it too often shows that even resection is impracticable. It is only a fifth of all cases where symptoms give good reason to believe that cancer of the stomach exists in an early stage that are amenable to surgical treatment.

The X-Rays in Diagnosis of Renal Calculus.

Ringel (*Centralbl. f. Chir.*, 1898), by experiments in the laboratory and observation on the living subject, has concluded the uncertain results attending the use of the X-rays, in cases of supposed renal calculus, are due to the fact that the transmission of the rays is influenced by the chemical composition of the calculus. Whilst an oxalate of lime calculus forms a well-defined picture, a urate calculus presents but an indistinct outline; and a phosphatic calculus, which, like a gall-stone, transmits the rays, is almost, if not quite invisible. The absence of a shadow, therefore, is no proof that a renal calculus is absent; and this rule will apply even to cases of oxalate calculi, or the outlines of such deposits may be obscured by pus or turbid urine. The X-rays are still more unsatisfactory in cases of vesical calculi, as the author has succeeded only twice in making out by skiagraphy the presence of a stone in the bladder, whilst in several cases of a very large stone removal by operation on the living subject or after death, no traces were afforded by this method of investigation.

THERAPEUTICS.

IN CHARGE OF GRAHAM CHAMBERS.

The Treatment of Uremia of Nephritis by Tapping and Venesection.

Ewald, of Berlin, at the recent meeting of the British Medical Association, strongly advocated this method of treatment. He called attention to the fact that the mode of action of many of the diuretics now in use is not thoroughly understood, and may be due to irritation of the secretory elements of the kidney, and that the cure of nephritic dropsy by diuretics and hydragogue cathartics was usually tedious. The writer advocated early puncture for ascites and pleuritic