

PRACTICAL GUIDE IN ANTISEPTIC MIDWIFERY IN HOSPITALS AND PRIVATE PRACTICE. By Henry J. Garrigues, A.M., M.D., Professor of Obstetrics in the New York Post-Graduate Medical School and Hospital, etc. George S. Davis, Detroit, Mich., 1886. Price 25 and 50 cents.

THE PHYSICIANS' LEISURE LIBRARY, BRIGHT'S DISEASE. By Alfred L. Loomis, M.D. Geo. S. Davis, Publisher, Detroit, Michigan. Price, paper, 25 cents; cloth, 50 cents.

The above is a well-written scientific discussion of Bright's Disease, and is calculated to make clear for the student and practitioner many points in the study of this disease that have for so long a time been massed under this common term. He describes three varieties of the disease:

1. Parenchymatous nephritis, which has been known under the heads of tubular, diffuse, catarrhal, croupous, desquamative and glomerular nephritis.
2. Interstitial nephritis, or what is commonly known as cirrhotic, hobnail, red granular, gouty or gin-drinker's kidney.
3. Amyloid kidney, or what has been known as waxy or lardaceous kidney.

There is a very readable article upon uraemia and albuminuria. Reference is also made to the cardio-vascular changes, retinal changes and tubercasts. In acute Bright's Disease he advises the employment of digitalis primarily, claiming that above all it has the greatest efficiency. The book, on the whole, is one that is fitting to the position it occupies, a companion to the other valuable little works that Mr. Davis has given to medical literature under the name of the Physician's Leisure Library.

THE PREVENTIVE TREATMENT OF CALCULOUS DISEASE, AND THE USE OF SOLVENT REMEDIES. By Sir Henry Thompson, F.R.C.S., M.B., Lon. Surgeon Extraordinary to His Majesty, the King of the Belgians; Consulting Surgeon and Emeritus Professor of Clinical Surgery to University College Hospital; Fellow of University College; late Professor of Surgery and Pathology to the Royal College of Surgeons; Honorary Member of the Société de Chirurgie de Paris, etc.

Is there not a period in the history of the process which leads to the formation of renal and vesical calculi, whether in the condition of gravel, concretion, or stone at which it might be possible to prevent the development of a considerable deposit and the necessity for mechanically removing it? This important question is formulated by the most eminent authority upon the subject involved, Sir Henry Thompson, and he accompanies the question with a full and satisfactory answer in the affirmative, in a short book of 50 pages which is included in the May issue of Wood's Medical and Surgical Monographs. Admitting that renal and vesical calculi which are formed by diseased action of the bladder are only amenable to mechanical treatment, he demonstrates that the formation of uric-acid calculus can be checked at almost any stage of the complaint, and rendered impossible, if proper treatment is adopted. His consideration of the subject is concise though full, and eminently

practical, and will undoubtedly afford a revelation to many regarding the susceptibility of this affection to medicinal treatment.

THE INTESTINAL DISEASES OF INFANCY AND CHILDHOOD. PHYSIOLOGY, HYGIENE, PATHOLOGY AND THERAPEUTICS. By A. Jacobi, M.D., President of the New York Academy of Medicine; Clinical professor of Diseases of Children in the College of Physicians and Surgeons, New York, etc. 1887. Geo. S. Davis, Detroit, Mich.

As the season of the year during which diseases of the intestines in children are so prevalent is rapidly approaching, this little volume by such a renowned author cannot fail to prove highly interesting to our numerous readers. The writer informs us that of all the fatal affections which occur in the first year of life, forty per cent. are diseases of the digestive, and twenty per cent. diseases of the respiratory organs. In the second year the main cause of death changes entirely. For of forty-five deaths from the two causes in that year, but nine are due to diseases of the digestive, and thirty-six to affections of the respiratory organs. Mortality diminishes with every day of advancing life; every additional hour improves the baby's chances for preservation. Almost one-half of the infants who die before the end of the first year, do so before they are one month old. The causes of the disease are the more active the earlier they are brought to bear upon the young with their defective vitality. Two grave conclusions are to be drawn from this fact. The first is, that diminution of early mortality depends upon avoiding diseases of the digestive organs by insisting on normal alimentation. That is particularly important in the first few months. The second conclusion is the following: That the hygienic rules for infants concern the digestive organs mainly, so much so that infant hygiene and the hygiene of the digestive organs in infants appear to be nearly identical. The book proves most interesting and is eminently practical.

THE MODERN TREATMENT OF PLEURISY AND PNEUMONIA. By G. M. Garland, M.D., Instructor in Clinical Medicine, Harvard Medical School. 1888. George S. Davis, Detroit, Mich.

This little work deals in a very able manner with the treatment in a modern fashion of these two very important (because so frequent in occurrence) diseases. The ancient treatment of pneumonia, Dr. Garland says, has varied with fashion. He divides it into six categories, viz, depletive, supportive, expectant, antipyretic, antiseptic, symptomatic. He discusses all these methods more or less briefly, spending some time on the antipyretic and its statistics. But one of the six receives any commendation,—the supportive, which, combined with the symptomatic method "forms the only satisfactory treatment thus far devised." Early in the disease the author sees no objection to the use of opium in full doses, and thinks it certainly "a wise and humane proceeding," and one which "can produce nothing but benefit to the patient." Later in the disease he admits the danger of its use. He also condemns poultices unless they are properly applied and is as hot as the patient can bear them. He says poultices do not shorten the disease,