

ANTITOXIN.—European reports of the use of antitoxin are favorable to the new remedy. In the provincial reports from Croatia and Slavonia, appearing in the *Wiener Klin. Woch.*, it is stated that in the rural districts in all 255 cases of diphtheria were treated with the antitoxic serum; 181 of which were serious, 74 moderately serious. If these 226 recovered, that is a mortality of 11.4 per cent. In the towns of 173 cases (101 serious, and 73 less so) 156 recovered, giving a mortality of only 9.7 per cent., or 1.7 per cent. less than in the country. The difference is to be explained by the country cases coming, as a rule, later under treatment.

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SOME POINTS IN NERVOUS DISEASES.—Dr. Philip Coombs Knoff in his able address as President of the Neurological Society, directs attention to some points of much importance. He contends the term functional must be banished, by showing the pathology of the so-called functional diseases. Some order must be brought out of the chaos now labelled neurasthenia. It is too much to hope than we can remove sclerosed tissue. Our hope must lie in prevention. Many diseases of the nervous system are due to infection. Along this line lies the hope of the future. Much can be done for those who have unstable nervous systems and brains. The world cannot be altered to suit them; but they can be regulated, so as to guard them against what is likely to specially injure their defective nervous organization. Then steps should be taken to guard the public against the fanatical influences of the neurotic in the fields of sociology, politics, morals, religion, art and literature. The diminution of infectious diseases, more rational standards of living, and greater security for life tend to lessen the amount of nervous diseases. There is much that is distinctly preventable.

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MODE OF DILATING THE CERVIX UTERI.—Dr. James Braithwaite (*Brit. Med. Jour.*, June 29th) contends that when Hegar's, Duncan's or Galabin's dilators are employed, as they usually are, the cervix is stretched rather than dilated, and that there is often a good deal of laceration. When the dilation is performed in the intermenstrual period the tissue is very rigid, especially the internal os. There is great difficulty in getting the dilator to pass into the uterine cavity. The writer has overcome this difficulty by making the dilation just when the menstrual flow ceases. At this period the cervix is soft and elastic; and Hegar's dilators, from one to seventeen, can be readily introduced. This admits the index finger. In this way there