

the case is, in reality, very simple. It is a not very uncommon or extraordinary example of a functional neurosis; in other words, of traumatic hysteria originated by profound psychological disturbance. And associated with and underlying this in its present stage is a considerable amount of general nervous depression, such as is often termed neurasthenia. A recognition of these conditions is essential if treatment in the case is to be of any avail. It is, we think, a matter of regret that paragraphs, more or less of a sensational kind, such as that from which we have quoted, should appear in the lay press where no comment can be made upon them, or explanation be given to them, by those who are competent to do so. They are fraught with grievous harm. They increase the apprehension, anxiety, and nervousness of those who have been recently in railway accidents, and who may happen to read them, and indirectly they are in this way likely to cost the railway companies many thousands of pounds. This is no idle statement, but is a fact within our own knowledge on more occasions than one.—*Brit. Med. Jour.*

ALCOHOL TREATMENT OF PUERPERAL FEVER.

—Dr. A. Martin delivered a lecture, on June 28th, before the Berlin Society of Obstetrics and Gynecology, in which he mentioned anew the favorable influence of alcohol upon the course of puerperal fever. The administration of alcohol in puerperal sepsis was first recommended by Breisky, and eleven years later was again taken up by Runge, and thoroughly discussed in several communications. Dr. Martin, whose cases were for the most part in private practice, complains that most of the cases of puerperal sepsis in private practice are brought to the physician's knowledge for the first time when the infection has already become general, and when the prospects of a local treatment are least favorable. He communicates an account of 18 of the cases in which the administration of alcohol had been possible. Five of these 18 died. The cases were of extraordinary severity, in which treatment with alcohol was begun for the first time when the fever had raged for a week and the patients had been weakened by severe complications. Thus, there existed in several cases, which finally

ended in recovery, purulent parametritis, ichorous decomposition of the ovum, pyemia in one case with panophthalmitis and purulent destruction of a hip-joint; three of the cases were reckoned as of pyemia and fifteen as of septicaemia. Four of the 18 patients were taken sick in connection with an abortion, which was criminal in three cases; the other fourteen patients had given birth at the normal end of pregnancy, in three cases by artificial aid. In four cases local treatment was employed in addition to the use of alcohol, while in the other cases no advantage was to be expected from local treatment, except as disinfecting washes. The alcohol was given in the form of cognac, rum, Burgundy, Bordeaux, and southern wines, for the most part mixed with champagne; the most concentrated food possible was also given. It frequently required, however, energetic persuasion on the part of the physician and of the attendants to induce the patients to take the drinks, which often had to be changed. Diarrhoea occurred at times in nearly all the patients, and when it did the drink was changed, champagne being stopped, and mucilaginous drinks being given. In one of the cases, which is given in detail, the patient took within a period of six weeks the following: 17 bottles of cognac, 13 of Burgundy, 37 one-half bottles of champagne, 4½ bottles of other heavy wine, and 6 bottles of porter. Martin does not think, as Breisky did, that the favorable action of alcohol consists in its influence in reducing fever, but rather in a strengthening of the heart's action, and in the increase of resisting power of the individual against the ravaging action of the infection.—*Deutsche med. Wochenschrift, Med. and Surg. Reporter.*

RENAL SURGERY.—Mr. Kendal Franks, in a discussion on Renal Surgery at the last meeting of the British Medical Association, as reported in the *British Medical Journal*, called attention to a class of cases which were not uncommon, namely, those in which the diagnosis of renal calculus was almost certain, and in which the symptoms clearly indicated the affected side, and yet in which, when the kidney was exposed, the most careful digital manipulation and the most systematic exploration with a long needle failed to detect the presence of a stone. Now,