

born. In Georgia there are 137 Counties, and in all but twenty-six of them there are more boys than girls. These twenty-six counties include the large towns and cities. Strange that not one of the cities should be left out. Stranger still, the excess of girls is in proportion to population. Savannah though it has a somewhat smaller population than Atlanta, has a larger excess. This seems to be peculiar to old cities. It is so with Baltimore, New Orleans, and New York. The excess is greater in New Orleans than any where else.

STRIKING REPORT OF TRANSMISSION OF TUBERCULOSIS BY COW'S MILK.

At a meeting of the Académie de Médecine on February 24th (*Bull. de l'Acad. de Méd.*) M. Auguste Ollivier presented a communication on the transmission of tuberculosis by cow's milk. Two months previously he had been called in to a girl, aged 20, at Chartres, who was suffering from acute tuberculosis meningitis. Her parents were both very robust, and she herself had had no previous illness to speak of, and lived under excellent hygienic conditions. On December 14th, 1890, she complained of headache, which gradually became worse and she died on the 26th. The girl had been educated at a convent in Chartres, where within a few years, tuberculosis had attacked twelve pupils, five others (now six in all) of whom have died. On November 26th, 1889, the veterinary inspector had condemned the flesh of a cow which had been slaughtered that morning in the Chartres abattoir. The animal seemed to be in good condition, but there were tubercles in the lungs, peritoneum, and paunch, while the udder was "completely stuffed with them." This cow had belonged to the convent where the patient had been educated, and its milk had for many years been consumed by the pupils and others in the house. Between October, 1887, and the date of the slaughter of the cow, one of the pupils died of tuberculous peritonitis, one of general tuberculosis commencing in the mesenteric glands and three of pulmonary phthisis. Another pupil developed tuberculous disease of the elbow, and six others showed evident signs of tubercle of the lungs, but on being removed from the school, and kept for considerable periods in the country, recovered. In none of these was there any family history of tubercle.

RELATIVE FREQUENCY OF HEART DISEASE AT DIFFERENT ALTITUDES ABOVE THE SEA.

Dr. Neonilla Iwanoff, at the suggestion of Professor Vogt, of Berne, has recently made an analysis of the 25,500 cases of death from organic disease of the heart that occurred in Switzerland during the years from 1876 to 1886. The results of her study, together with some comments by Prof. Vogt are given—in *Med. Rundsch.* Feb. 1st, 1891. On grouping the various regions of Switzerland according to their altitude above the sea, Dr. Iwanoff found an annual mortality from organic disease of the heart (calculated for 100,000 living) of 102 at the first elevation (from 650 to 1,300 feet above the sea-level), 92 at the second elevation (from 1,300 to 2,275 feet), 82 at the third elevation (from 2,275 to 3,900 feet), and 47 at the fourth elevation (3,900 feet or more);—Thus showing clearly that the liability to cardiac affections diminishes steadily as the altitude increases. It appeared further that the mortality from heart disease was greater in the cities than in the country. "These facts are interesting," says the New York Medical Journal, "especially when we consider that formerly sufferers from organic disease of the heart were cautioned against all active physical exertion. They also seem to sustain Oertel's theory of cardiac therapeutics, which is still so strenuously combated by many writers." Prof. Vogt adds that the comparative immunity from heart disease at the higher levels was especially marked among the agricultural population. In the industrial districts there seemed to be a diviation from this rule. He thinks that this diviation is more apparent than real, and calls attention to the fact that the artisans in the mountain towns are mainly employed in indoor work, such as watchmaking and machine embroidery, whereas in the lower regions they are engaged in the building trades and similar occupations calling for constant movement of the body. This explanation receives support from the results of an investigation of 120,000 recruits for the army, from which it appeared that occupations involving a sedentary life in confined air showed a prevalence of heart disease above the average in almost every instance.