

tioned by the physicians of Valparaiso, results from the recent works of Brown Séquard on the properties of the nervous system.—*L'Union Méd.*

CLINICAL THERMOMETERS.—Dr. Edward R. Squibb published, in the second number of *Ephemeris*, an excellent article on Clinical Thermometers which has not attracted the notice which it deserves. The clinical thermometer has always been supposed to be an instrument of precision, but that this is not so, probably more than one medical man has found to his sorrow, when he has relied upon it in making his diagnosis. No doubt many can remember the time when they have been frightened at the high temperature registered, and have either ceased to put reliance in thermometric diagnosis, or have tested their thermometer and found it one, two, or even three degrees out of the way. A good instrument is very valuable, but, as Dr. Squibb says, a poor one is an abomination and a fraud. It is certainly odd that after so many years they have been in daily use, that, as a rule, physicians have hardly suspected that a thermometer (at least a good-looking one) could testify falsely. Dr. Squibb tells us how to select a trustworthy instrument, and this without regard to its appearance or price, both of which are so deceptive. Errors may arise from imperfect tubes or from careless construction, but the most important source of error lies in the fact that for three years the glass continues to contract, so that the most carefully-made thermometer may soon become useless, unless it has been properly "seasoned" before being graduated. This contraction of the glass continues for about six years, but the error for the last three is so small that it may be neglected. An old instrument, the error of which is known, is of great value, as it may be used to determine the errors in others. On the thickness of the glass will depend the sensitiveness of the thermometer. If the

glass is too thick, then it will register too slowly, and time will be lost; if too thin, it will be easily broken. Therefore, test your thermometer, and by experiment determine the shortest time that is required for it to attain its highest reading. This ought to be reached, on the average, in from six to eight minutes. See that the register does not shake down too easily, for many a thermometer has been destroyed by the rough shaking of an easily moving register. Get an instrument which can be read easily. Finally, slowly and carefully heat the thermometer in warm water until the column of mercury is within one or two degrees of the top. If, on cooling, the mercury is pushed down, there is too much air in the tube, and the instrument must be discarded. Do not buy a thermometer unless with it there be a certificate from either the Yale or Kew Observatory, stating the variations from the normal standard. The older the certificate the better. Even after every precaution, it is better to verify the correctness of the thermometer in daily use every few months.—*San Francisco Western Lancet, Cincin. Med. News.*

PHYSICAL DIAGNOSIS.—O. Wendell Holmes: I have often felt, when seeing hospital patients worried by hammering and long listening to their breathing, in order that the physician might map out nicely the diseased territory, the boundaries of which he could not alter, as if it was too much like the indulgence of an idle and worse than an idle curiosity. A confessor may ask too many questions; it may be feared that he has sometimes suggested to innocent young creatures what they would never have thought of otherwise. I even doubt whether it is always worth while to auscult and percuss a suspected patient. Nature is not unkind in concealing the fact of organic disease for a certain time. What is the great secret of the success of every form of quackery? *Hope kept alive.* What is the too fatal gift of science? *A prognosis of*