

finger into the uterus. Why not do this at once and remove the cause of the trouble? It is much more effective, and saves valuable time. In streptococcal infection, in which the inside of the uterus is smooth, the author suggests the injection of from two to four drachms of a 20 to 40 per cent. formalin into the uterus. As he does not say that this treatment has stood the clinical test, we think it would have been better to omit it from a formal text-book. The antiseptic advised for the hands, after washing in sterile water or 1 per cent. lysol, is bichloride of mercury, 1:500. The present writer believes this to be an efficient antiseptic, and used it, in common with all the other men, at the Rotunda some years ago. It produced, however, in many of those using it such a leathery condition of skin and dark brown finger nails that he has abandoned it in favor of lysol alone (1 per cent. solution), more recently lysoform, 1:40.

The author still recommends Neville's axis-traction forceps. We used them for some time, but abandoned them because we do not believe them to be true axis-traction instruments; also we think the instrument too large and heavy and the pelvic curve too flat.

Obstetricians owe a debt of gratitude to the Rotunda school for the system of midwifery they have elaborated, and to Dr. Jellett for the clear and careful presentation of it in his "Short Practice of Midwifery." We do not find this last volume an improvement on the first, however. In fact, we think that the increase in size has been at the expense of that clearness which we so much admired in the original book.

The British edition of the present volume is admirable in paper, text and binding, but weak in illustrations, many of which are crude in the extreme. When will Old Country authors and publishers learn the value of accurate and artistic illustrations?

K. C. M.