A Treatise on Bright's Disease and Diabetes. By James Tyson, A.M., M.D., Prof. Pathology and Morbid Anatomy in the University of Pennsylvania. Philadelphia: Lindsay & Blakiston, 1881.

The author of this work is not unknown to literary and didactic fame, and, therefore, we began our perusal of his latest book with pleasurable anticipations and high expectations. We may confess imprimis that we have not been disappointed since its pages bear the stamp of the sign manual of the accomplished physician, the intellectual and thoughtful man. The most serious criticism to be made against it is an attempt to compress too much information into too small a space. However, so much has been written on the subject in late years that a summary was earnestly called for; and here the student, as well as the practitioner. who has failed to keep abreast of the tide of recent progress, will find what he needs more conveniently and intelligibly than anywhere else we know of.

Section I. presents an admirable account of the structure of the kidney, following chiefly Heidenhain, Klein, and Beale. The gross structure, the uriniferous tubules, the blood-vessels, the connective tissue, the lymphatics, and the nervesare all shortly but clearly discussed. Some valuable suggestions for studying the history of the kidney are intercalated, and the nature and act of the secretion of urine together with the functions of the kidney are briefly considered. Section II. gives very good directions for testing for albumen. The site of its transudation in albuminuria is located in the Malphigian capsule. In Section III. the subject of tube casts-their nature, and clinical significance-is taken up and treated with great fairness and impartiality. Our author considers them as an exudation from the blood of a fibrinous or albuminous nature coagulating in the tubules, and entangling whatever they contain. Waxy casts are regarded as a fusion and hyaline transformation of desquamated epithelium and other cells. It is admitted that casts may be formed in all parts of the tubules; not so often found in the urine, however, from the convoluted tubules as from the intercalary or intermediary portion whose structure is

identical with that of the convoluted portion. The author joins issue with Charcot as to the importance and significance of casts, and lays it down as a general proposition that their presence in urine always indicates disease of the kidney, the so-called mucus-cast being of course excepted. Section IV. discusses the classification of Bright's diseases. After citing those of the best authorities in Germany, France, and England, the author adopts the subdivision into acute and chronic; the acute comprising only a single form, the acute parenchymatous nephritis; the chronic including chronic parenchymatous nephritis, lardaceous disease, and interstitial nephritis. account of acute parenchymatous nephritis (Section V.) Langhans is closely followed, especially in describing glomerular nephritis, but Klein's contributions to our knowledge of this subject are quite overlooked. The clinical description is very good. In the treatment of convulsions the author's voice is raised, we think, wisely, against the growing practice of using morphia as introduced by Loomis. Sections VI. and VII. are also admirable summaries of existent knowledge, though the nature of the lardaceous substance is not dis-The author, although not mentioning the matter expressly, would not, we judge from the general tenor of his remarks, agree with Straus in holding that some cases of lardaceous kidney may run their course without albuminuria from first to last. In Section VIII. on interstitial nephritis in referring to the causation, Dr. Clifford is cited as the author of the theory of mental anxiety as an etiological factor; the name should, of course, be Clifford Albutt. Johnson's stopcock-action theory to account for the vascular and cardiac hypertrophy is ably defended by our author but he does not omit to give DaCosta and Longstreth's late renal ganglia change theory a passing notice. On the top line of page 180 the word "capillaries" has crept in, we think, by mistake, for "arterioles." The therapeutics throughout are very good, but no mention is made, and we, therefore, assume that our author has no experience, of the use of nitro-glycerine (glonoin) in relieving the high vascular tension, or of the nitrite of amyl for the same purpose