related, and it was noticed that the characteristic symptoms, especially trismus, were generally present. The diagnostic importance of the tonic contractions as opposed to the intermittent ones in certain other conditions that simulate tetanus, such as strychnia poisoning, is emphasized. The authors found that their studies supported the earlier ones as regards the mortality, which decreases gradually after the tenth day and rapidly after the fifteenth. The study showed clearly the value of immediate radical local treatment, and that the most important thing is to open the wound freely in all directions under general anesthesia. Many patients were more or less benefited by the local carbolic acid treatment, and some observers report good results from the local use of ice or freezing mixtures, or treatment in a cold room. For palliative treatment, chloral and the bromids appear to have been most extensively used. Calabar bean has been much employed, and also morphin, which should be used with caution on account of its inhibitory action on the respiratory centres. There is no question as to the value of antitoxin as a prophylactic, the testimony is uniformly in its favor. It should be used in any case in which there is suspicion of tetanus infection. In a well-developed case of the disease it has no appreciable beneficial effect, neither reducing the mortality nor hastening recovery.

Splanchnoptosis from a Surgical Standpoint.—James E. Moore, M.D., Minneapolis (*Journal A. M. A.*, July 29th), states gynecologists have learned that replacing misplaced pelvic organs and supporting them by mechanical means gives only temporary relief. He discusses at some length the nervous disturbances caused by ptosis of the abdominal and pelvic viscera, and refers to the confusion and misapplication of terms used to designate this condition. He refers briefly to the various etiologic causes assigned to this disorder in the literature, and states that a patient suffering from vague, indefinite symptoms of varying severity should never be pronounced hysteric, dyspeptic or neurasthenic till visceral ptosis has been eliminated. He discusses the differential diagnosis and reviews the literature on this subject.

Immunity.—In Chapter XX of this continued article in *The Journal A. M. A.*, July 29th, tetanus is taken up in detail. The nature of the micro-organism is discussed, the period of incubation, mixed infections and the varieties of tetanus. The affinity of tetanus toxin (tetano-spasm) for the nervous tissue of susceptible animals, it is stated, may be demonstrated by test-tube experiments. The method by which tetanus toxin reaches the central nervous system is also considered. The value of tetanus antitoxin, the method of using it, and the necessity of its standardization, are also noted.