

strong as 480 grains. The hearing is in some cases very considerably improved by the artificial membrana tympani, but Dr. Roosa uses them only in cases of adults possessed of a considerable amount of intelligence.

In the treatment of mastoid periostitis by incision over the process, Dr. Roosa says that he has been sometimes amazed at the depth to which the scalpel entered. He recommends perforation of the mastoid bone when it is found to be diseased, and in cases of suppuration of long standing with frequent and painful exacerbations.

Fortunately for afflicted humanity, diseases of the internal ear do not often occur. In 1,500 cases of aural disease Dr. Roosa found only 57 such cases. The deafness occurs suddenly and is nearly absolute. The tuning fork can not be heard on any part of the head or against the teeth. In deafness from disease of the membrana tympani, or impacted cerumen in the external meatus the tuning fork on the head is heard even better than by the normal ear. In the treatment of diseases of the labyrinth, much was expected, at one time, from the use of electricity, but according to Dr. Roosa there are no authentic cases on record of a cure of a true inflammatory affection of the labyrinth by this agent.

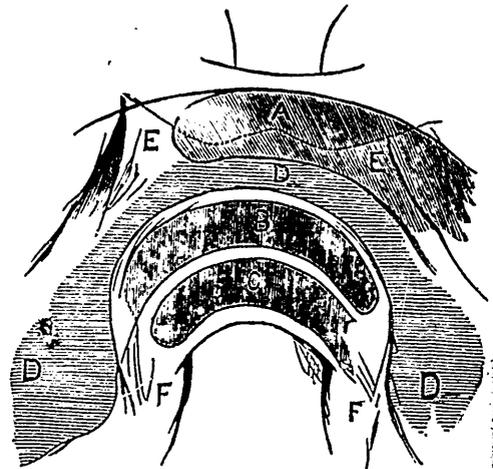
In bringing this imperfect review to a close we would add that if ever a scientific treatise met "a felt want" it is Dr. Roosa's. We trust that the author, who is still young, may long live to see the fruit of this young tree that has been planted under such favourable auspices.

The wood-cut illustrations, of which there are 110, are remarkably well executed, and the publishers may be congratulated on the good style in which the book has been brought out; it is unexceptional in every respect.

**APOMORPHIA AS AN EMETIC.**—This substance is obtained from opium or morphine. Its importance as an emetic is owing to the rapidity with which it operates. It is best used subcutaneously; the dose is from  $\frac{1}{8}$  to  $\frac{1}{7}$  of a grain in solution. Emesis is brought about in from 3 to 5 minutes, and the effects pass off within half an hour, no unpleasant results being left behind. The muriate of apomorphia is chiefly used.

## CHANG AND ENG.

The *Philadelphia Medical Times*, (Feb. 19) from which we copy, contains a full account of the *post mortem* examination of Chang and Eng, which was conducted by Drs. Pancoast and Allen. The chief interest in regard to this phenomenon centres in the anatomy of the band which united them. The following is a diagrammatic representation of the dissection of the band, so far as it has been examined. The words Eng and Chang in Siamese mean "right and left," respectively, and they are so represented in the diagram:



Eng

CHANG

- A.—Upper or hepatic pouch of Chang.
- B.—The peritoneal pouch of Eng.
- C.—The lower peritoneal pouch of Chang.
- D.—Connecting liver band, or tract of portal continuity.
- E. E.—(Dotted line) union of ensiform cartilages.
- F. F.—Lower border of the band.

The band is about four inches long and eight inches in circumference. There was found to be a union of the twins at the ensiform cartilage. Two pouches of peritoneum were also found to pass from Chang into the body of Eng, and one from Eng into the body of Chang, and lying between the two preceding. Their livers were found to be continuous, so that a colored injection thrown into the portal vein of Chang passed through the band into the liver of Eng. In the absence of liver tissue this connection is called the *tract of portal continuity*. The vascular connection of the band has not yet been fully investigated. When this has been done we will again refer to the subject and give a more complete description. There is, however, no large vessel connecting them, as was formerly supposed.