

France, let them come to us, let them help us with their means, give us their advice; let them work with us to purge humanity of cancer, the worst evil that has ever existed; let them write to us for information and we will provide them willingly and gratefully with any document they may need.

SYPHILITIC SPINAL MENINGITIS.

Southard and Solomon (*Neurosyphilis*, page 23) describe a post-mortem examination of a spinal cord in which at one point in this region the dura mater was so firmly attached to the pia mater that the line of demarcation between the two membranes was hard to make out. In fact, it seems clear that there could have been no free inter-communication between the spinal fluid above these adhesions of dura to pia mater and the spinal fluid below the adhesions. Accordingly, it seems that lumbar puncture, had it been practised in this case, would have failed to show features representative of the whole cerebro-spinal system. Moreover, since at no point in this region of adhesions or in the pia mater of the spinal cord below this point, were found any lymphocytes, it seems clear that the ordinary lumbar puncture would have failed to reveal a phagocytosis. It appears that the process in the lower part of the spinal cord was to all intents and purposes extinct, which seems to prove that at least in some cases there are compartments the spinal fluid from which will give a positive Wassermann and other compartments will give a negative Wassermann.

THERAPEUTICS OF YEAST.

Drs. Philip B. Hawk, F. C. Knowles and M. E. Reh fuss, of Philadelphia, and James A. Clarke, of New York, with the collaboration of O. Bergeim, H. R. Fishback, C. A. Smith and R. A. Lichenthailer, made careful investigations of the use of yeast, using fresh supplies of Fleischmann's compressed yeast (*Jour. Amer. Med. Assoc.*, Oct. 13, 1917). The usual dose was one yeast cake some time after each meal. The authors studied the comparative value of living and dead yeast. The yeast was killed by treating it with boiling for a few minutes. From their tests it is apparent that yeast may be administered satisfactory either with meals or on an empty stomach, and that killed yeast acts much the same in the stomach as living yeast. If the patient is troubled with gas formation it is preferable to use killed yeast or to administer killed yeast between meals. The living yeast, in large part, passes through the stomach into the intestines. The following are the authors' conclusions:

1. Bakers' yeast was found to be a useful remedy in the treatment of