

THE RISE OF PHYSIOLOGY IN ENGLAND.—In his Harveian oration (*British Medical Journal*, October 26th) on "The Rise of Physiology in England," Dr. W. S. Church says that the very brilliancy of recent discoveries and the vast increase in our knowledge may for a time react prejudicially on the art of medicine. He asks if we are not in danger of being carried away by our enthusiasm, and of falling into the predicament described by Buckle, of our facts out-running our knowledge and encumbering our march. This difficulty arises in the training of students. The range of subjects bearing on medicine is so vast and so important does each appear to those best acquainted with them, that there seems, he thinks, a danger lest, in endeavoring to secure an acquaintance with them all, we may forget that the future life of the majority of those entering the profession is to be spent in ministering to the victims of accident or disease, and that the due recognition and treatment of sickness and injury, experience and trained clinical observation are absolutely necessary. No amount of laboratory training will enable a man to recognize the nature and proper mode of reduction of a dislocation or know scabies when he sees it. The words of Sydenham to a friend, he says, will always hold good: "The art of medicine can be properly learned only from experience and exercise."

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THE OPERATION OF THYROTOMY.—F. DeSanti, in discussing the operation of thyrotomy, in the *British Medical Journal* of the same number, gives a short account of the cases in which it has been performed at St. Bartholomew's Hospital during the last fifteen years. Of the thyrotomies for intrinsic malignant disease, amounting to fourteen on thirteen patients, there was only one death from the operation itself. In three cases the disease was too extensive for removal; in five cases the disease recurred, one patient dying three months, and two two years after the operation. The fourth was still under observation. One of these patients was subjected to a second operation, which was again followed by recurrence. In two cases the patients were quite well more than three years afterwards. In one case there was no recurrence. In one case the patient was quite well a year afterwards. One operation was performed for disease supposed to be malignant in 1893; the patient was quite well at present. Of thyrotomies for extrinsic malignant disease, amounting to three on two patients, one died as the result of the operation. In the other recurrence took place, and a second operation was performed; within two years recurrence again took place, and death followed an attempt to remove the glands. Thyrotomies for innocent tumors gave uniformly good results.