tion of an invading agent so as to render it susceptible to phagocytosis is an assumption which in the present state of our knowledge is wholly unwarranted. As an interpretation of observed
phenomena it is a failure. Further immunization with the
causative organism in an individual already afflicted with an
infective disease process does not cause an increase in hypothetical opsonins, but exerts its influence altogether upon the
disease foci. This is in obedience to a biologic law, formulated
by the writer after extended observation, that injection of
extraneous materials into an organism having a localized area
of disequilibrium occasions reaction in the diseased and not in
the normal areas.

Although bacterio-therapy as a curative procedure is a part of the practitioner's armamentarium, the method of governing the reactions by estimation of the opsonic indices is slowly losing ground. From the first, physicians as a body did not accord it a very enthusiastic reception. The method is complex and technical to a degree that wearies the man in general work. As a laboratory method no doubt it has a place, but for routine office work it is out of the question. A small number of enthusiasts still advocate opsonic estimations as a routine measure, but these, too, will eventually return to the more dependable clinical evidences of reaction as guide to the administration of bacterial vaccines.—H.S. in The Lancet-Clinic.

Incontinence of Urine in Children.

Dr. A. L. Mentzikovsky, of St. Petersburg, who has made a special study of the Incontinence of Urine in Children, has formed the opinion that the pathology of this morbid condition consists chiefly in the degree of sensitiveness, and of vascularity of the mucous membrane of the bladder and urethral canal. He distinguishes two types. In the one the mucous membrane of the urinary passages is extremely sensitive and hyperemic. The least touch excites acute pain with intense reaction, so that it is impossible to introduce a catheter without a general anasthetic. The second type is, on the contrary, characterized by diminished sensibility, and the interior of the bladder and urethra can be explored without causing any reaction on the part of the In the first case the smallest accumulation of urine in the bladder occasions a reflex contraction of the muscles and causes a continual incontinence of urine. In the second case the sensibility of the mucous membrane of the bladder is so diminished that the reflex contraction of the sphincter vesical