alone is taken, the excess is thrown out partly, at least, by endoemotic laws not yet clearly applied. How the quantity of substances to be thrown out is determined, I do not yet distinctly see."

The great agent in affecting these changes is oxygen. Of this there are many familiar proofs, as the production of carbonate of petash in the urine after the citrate of potash has been taken. " Very lately Professor H. Rose, of Berlin (' Phil. Mag.,' July, 1849) has made some most interesting experiments on the inorganic constituents of organic bodies, chiefly as regards their degree of oxidation. He divides the degrees of oxidation into fully exidized, partially urine -The food, if it consists of wheat and other grain, contains organic substances, the inorganic constituents of which exist partly in an oxidized, partly in an unexidized The flesh is a partially oxidized body; but the quantity of unoxidized state. matter in the blood is larger than in the flesh, and the quantity of fully exidized matter is smaller in the blood than in the flesh. The urice is a perfect and fully oxidized substance. The inorganic constituents of the prine are as highly oxidized as it is possible for them to be."-London Journal of Med. Science.

PATHOLOGY OF PHTHISIS.—ON ELASTIC FIBRES FOUND IN THE SPUTA OF PHTHISIS.

By Professor Shræder Van der Kolk.

The learned Utrecht Professor, so well known for his researches into the structure of the lungs, declares that the microscope offers an infallible means of detecting the existence of cavities, by exhibiting in the spita the presence of the *elastic fibres* which surround the cells of the lungs; and this the more certainly, as the cavity is in an early stage of formation, consequently, at the very period when such a sign, if to be depended upon, is most wanted. They are of a arched form, very thin, with sharp borders, and are sometimes covered with fat, which is removable by ether. They must not be mistaken for a species of conferva, which very tapidly appears in the expectoration, especially when this contains fat, but which is recognizable by its ramifications terminating in tumi-fied cells.—Brit. § For.Med. Chir. Review, Jav'y, 1851.

SURGERY.

DR. CHEVERS, ON CAUSES OF DEATH AFTER INJURIES.

It is almost impossible to have been long in the habit of paying close attention to the pathological examinations in one of our large metropolitan hospitals, without observing that a very great proportion of those who die from the secondary effects of mechanical injuries have been the subjects of marked, and often very acute, form of renal, hepatic, or splenetic disease or of the whole of these combined. For the purpose of confirming the observations which I have made at Guy's Hospital for several years past, I carefully examined the accounts of all the cases where death occurred from the secondary effects of operations and mechanical injuries of every description, which have been entered in the post-mortem Register of the Museum during the last fifteen years, * corprising the whole of the cases in which examination of the bodies of patients so

The period within which these occurred extended from the 19th of May, 1827, to the 19th of May, 1842.