The application of europhen was kept up until cicatrization was almost complete, the loss of substance being entirely filled up without deformity. The author concludes in assigning to europhen an important part in the cure of this, without ignoring the utility of the internal treatment. He points out that distinct improvement and arrest of the phagendic process did not occur until applications of europhen were systmatically made, and recommends the use of this drug in all conditions where iodoform is ordinarily employed.

ROENTGEN RAYS IN THE DIAGNOSIS OF PULMONARY TUBERCULOSIS AND OTHER DISEASES OF THE LUNGS AND CHEST.

J. E. Stubbert ("Yale Medical Journal") has for more than a year been using the X rays in the diagnosis of areas of tuberculous infection in their incipency, depending upon the relative resistance to their passage through healthy and diseased tissues. A machine with four-inch spark coil was at first employed, but subsequently it was found necessary to double the power of the coil. Practice and a knowledge of the fluoroscopic picture of a normal thorax are necessary for success. The patient is seated in a chair without a back, with a Crookes tube held between the scapula and the fluoroscopic screen in front of the chest. A dark cloth, placed over the tube and the patient's shoulders, concentrates all the light on his chest, and the outline of the thorax appears on the screen in front of the patient. The distance between the light and the patient should be about one inch, which would ordinarily mean twelve inches between the light and the fluoroscope. Having examined the apices, the fluoroscope is passed up and down the whole thoracic region in search for other foci of disease. It is important not to take the eyes from the instrument when sliding it over the chest, lest fine points of comparison be lost. Slight haziness indicates beginning tuberculous infiltration. Decided shadows indicate consolidation; circumscribed spots of bright reflex surrounded by dark rings, or in dark areas, indicate cavities. Intense darkness, especially at the lower portion of the lung, indicates old pleuritic thickening over consolidated lung tissue. Pleural effusions give black shadows, the upper level of which may be agitated by succession. The shadows of the second stage of pneumonia and of tuberculous consolidation are identical. The reflex of emphysema and of asthma is abnormally clear, and the movement of the diaphragm is restricted. Stubbert gives a table of 100 cases, comparing physical and fluoroscopic examination, and believes that his own investigations and those of others have proved that: 1. The fluoroscope is an accurate agent for corroborating and extending diagnoses made by ordinary methods. 2. It is capable of demonstrating foci of tuberculous infection earlier than they can be distinguished by the ear. 3. It shows unilateral or bilateral enlargement or displacement of the heart. 4. Emphysema, asthma, pleurisy, hydropneumo-thorax and pneumonia are all easily recognized, and their limits demonstrated. 5. Thoracic aneurisms are recognizable in their early stages.

SIMPLICITY IN MEDICAL WRITING.

From an editorial in *The International Journal of Surgery* we select the following:

First select a title that will tell the reader as near as possible what the article contains. To write a paper of value an author must understand his subject. He should express his ideas and convictions in plain language, and aim at brevity *always*. Revise: cut down; boil down; "I came, I saw, I conquered." All manuscript is improved by the boiling process. Busy readers thank an author for using this rare gift to condense. When the subject has been covered, stop writing.

In commenting editorially upon "brevity and simplicity," in the March issue of *The Laryngoscope, Dr. Scott Bishop, of Chicago*, says:

"When a man says clearly just what he means, in a way that one cannot help but understand, you mentally say: "That's good; I like that," and you go on reading his article to the end, enticed sentence after sentence by such a plain presentation of his