cal terminology calls for an extensive vocabulary. That the editor has been able to make this complete and up-to-date through a careful examination of medical literature and at the same time to make a judicious, exact and compact selection, has, no doubt, been a task of the greatest and most arduous application. He, however, reaps the full benefit of that task in his splendid endeavor and can well pride himself upon having placed before the medical profession a book of the utmost importance to every member thereof. Beautifully bound in flexible leather, with thumb index and with introductory explanatory notes, the book is a model of the publisher's art. The whole production is admirable and is exceedingly well worthy a place in the library of every physician, dentist and veterinarian. In fact, we do not see how anyone could get along without it. The Canadian agent, Mr. Charles Roberts, 608 Lindsay Building, Montreal, will be pleased to forward literature and further particulars.

Can Sympathetic Ophthalmia Follow a Non-Perforating Traumatism of the Eye?

In the *Ophthalmoscope*, August, 1911, Mr. T. Harrison Butler treats of this interesting subject. In his search through the literature he did not find one authentic case of sympathizing inflammation without a perforating wound in the exciting eye, except, of course, the cases which sometimes happen where it follows an intraocular growth. He points out that sympathetic inflammation sometimes follows the perforation of a corneal ulcer, if some operative interference be undertaken, such as cauterization, iridectomy or corneal section. Ophthalmologists are pretty much decided that the answer is "No" to the question which is the subject of the paper, and Mr. Butler answers "No," but yet he would consider it a risk to spare an eye which had become blind from a plastic inflammation following a non-perforating injury in which the eye was soft and tender and in a condition of phthisis bulbi.

W. H. L.