

10. Compact without sacrificing completeness; every account complete on same page—a decided advantage and recommendation. 11. Uniform size of leaves. 12. The statement of the most complicated account is at once before you at any time of month or year—in other words, the account itself as it stands is the simplest statement. 13. No transferring of accounts, balances, etc. To all physicians desiring a quick, accurate, and comprehensive method of keeping their accounts, we can safely say that no book as suitable as this one has ever been devised. Net prices, shipping expenses prepaid: No. 1. 300 Pages, per 900 Accounts per year, Size 10x12 Inches, Bound in $\frac{1}{4}$ Russia, Raised Back-Bands, Cloth Sides, \$5.00 in the United States, and \$5.50 in Canada (duty paid). No. 2. 600 Pages, per 1800 Accounts per year, Size 10x12 Inches, Bound in $\frac{1}{4}$ Russia, Raised Back-Bands, Cloth Sides, \$8.00 in the United States, and \$8.80 in Canada (duty paid). F. A. Davis, Medical Publisher and Bookseller, 1231 Filbert Street, Philadelphia, Pa.

"EPILEPSY, ITS PATHOLOGY AND TREATMENT," a prize essay, by Hobart Amory Hare, M. D. F. A. Davis, Publisher, Philadelphia. Price, \$1.25.

This essay received the prize of four thousand francs from the Royal Academy of Medicine, in Belgium, in 1889. It is not only a resume of the views held by the best minds of the profession, but a careful analysis of the causes which produce epilepsy. The reader cannot fail to be impressed with the author's logic, and concludes with him, that "the treatment of epilepsy in the past has been as unwise as the treatment of most other diseases." His plans of treatment, while varying little as to the remedies to be employed, yet varies in this, that they are not given in any individual case, simply because they have succeeded in a former one, but that they are indicated by the peculiar phase of the disease, and the constitutional peculiarities of the patient. This work is not only unique, but will fully repay reading. Any practitioner having a single case of epilepsy under his observation should have a copy of this little volume.

A MANUAL OF AUSCULTATION AND PERCUSSION. Embracing the Physical Diagnosis of Diseases of the Lungs and Heart, and of Thoracic Aneurism. By Austin Flint, M. D., LL. D., Professor of the Principles and Practice of Medicine and of Clinical Medicine in the Bellevue Hospital Medical College, etc., etc. Fifth edition, thoroughly revised. By J. C. Wilson, M. D., Lecturer of Physical Diagnosis in the Jefferson Medical College, etc., etc. Illustrated with wood-cuts. Philadelphia: Lea Brothers & Company. 1890. Price \$1.50.

Physical diagnosis is an all-important subject, for the more skilled we are in percussion and auscultation the earlier will we be capable of discovering signs of incipient disease and hence be better able to arrest the various pathological inroads. This little volume is entitled to position as one of the classics in medicine, giving the results of the investigations of one of the best observers that ever graced our profession. The clearness and appropriateness of his style greatly enhance its value. To the student during his hospital attendance this little book should prove extremely efficacious.

PAMPHLETS RECEIVED.

Laparotomy for Intestinal Obstruction. By Cornelius Kollock, A.M., M.D., Cheraw, S.C.

The Treatment of the Morphine Disease. By J. B. Mathewson, M.D. Home for Habitues, Brooklyn, N. Y.

Any of these would probably be mailed to our readers on requesting their authors to do so, and by enclosing postage stamps.

The Animal Suture, its Place in Surgery. By H. O. Marcy, A.M., M.D., LL.D., Cambridge, Mass. This is a most interesting history of the subject, and the author moreover makes a strong plea for this suture.

The Relation of Bacteria to Practical Surgery. The Address on Surgery delivered before the Medical Society of the State of Pennsylvania. By John B. Roberts, A.M., M.D., Professor of Surgery in the Woman's Medical College, Philadelphia.

Suppurating Endothelioma. Myo-fibrous in a condition of Necrobiosis. Remarks on treatment of the Pedicle. By Mary A. Dixon Jones, M. D., Brooklyn, N. Y. The talented authoress makes a strong priority claim for the combined method of amputating the uterus by abdominal section, and afterwards removing the stump by vaginal hysterectomy, which we believe is to be the ideal method of the future.

Eight cases of Thyroid Cysts and Adenomata, treated by enucleation. By Charters J. Symonds, M. D., Lond. Assistant Surgeon to Guy's Hospital. In the concluding remarks the author says of the eight cases, six were in women and two in men. Six of the patients were thirty or under, while one was fifty-four. Several methods have been adopted in the treatment of cysts of the thyroid gland. Of the two leading plans, one is that of injecting perchloride of iron and setting up of suppuration, and maintaining drainage. This is known as Mackenzie's, upon which a recent communication has been made by Mr. Howell. This plan takes as a rule many weeks, and is often attended with severe hectic fever. Its chief merit lies in the small resulting scar. Leaving this plan to stand on its own merits, Symonds prefers one that leads to a rapid recovery in a few days.

The Insane in the Province of Quebec. By Dr. A. Vallee, Medical Superintendent of the Quebec Lunatic Asylum. The author's conclusions are as follows:—

1. Insane asylums should retain their character of hospitals for treatment and be reserved as much as possible for dangerous or curable patients;
2. As it is generally admitted that mental diseases are all the more curable according as they are recent, the legislation should make the conditions of admission as easy as possible for patients who are to be treated;
3. Labor should be organized as a means of treatment in our asylums, and workshops should be set up in them and agricultural work made more general so as to provide occupation for the able-bodied insane;
4. Imbecile and idiot children should be placed in institutions where efforts would be made to educate them and teach them trades which would enable them to earn their living;
5. Asylums for inebriates should not receive ordinary insane patients for such a commingling gives rise to serious drawbacks;
6. The uncleanly and demented patients should be placed in refuges where they would receive the treatment they require at a lower cost than in the asylums;
7. The medical board should be authorized to hand over to families who are able to take care of them, certain harmless, quiet and incurable patients who are able to work under supervision; these patients to be sent back to the asylum when necessary;
8. The system of discharges on trial should be made more general for harmless patients with provision for their being at once sent back if necessary.