

the Adelaide Hospital, on a man aged forty-eight, from whom he excised a large epithelioma, together with about six inches of the colon. The growth was the size of a large orange, and involved the hepatic flexure of the colon. It was remarkable previously to operation for its great mobility, generally being found to lie between the umbilicus and pubes as the patient lay on his back. The colon was divided on each side of the tumour and the intermediate portion removed, along with some small but hard glands which lay between the layers of the mesocolon. The divided ends of the colon were approximated, and sutured carefully with fine silk. The patient is at present in a convalescent condition. There was a large fecal evacuation on the fifth day per anum, and the bowels have been acting normally since. The structure of the growth was that of a columnar-celled epithelioma.

THE MEDICAL PROFESSION IN RUSSIA.—The general state of the medical profession in Russia appears to be very unfortunate. Dr. C. Yaroshevski, in the *Russkaya Meditsina*, states that, though the number of doctors in proportion to the population is very much less than in other European countries, yet the destitution among them is alarming. Of late there have been numbers of suicides of medical men who were without the bare necessities of life. The fees for medical attendance are very low. There are, he says, 18,000 doctors for a population of one hundred millions, or one medical man to every 6,500 persons. In Odessa 40 per cent. of the whole population, and 94 per cent. of the very poor, are stated to have died without having had medical attendance. A similar state of affairs exists at Kostrome. Dr. Yaroshevski attributes this deplorable condition of things to the ignorance of the Russian people, who prefer to consult soothsayers and magicians, to the monopoly enjoyed by the pharmacists, and to the large number of Feldshers who are allowed to practise. The Feldshers are generally men who have served in the Ambulance Corps or have been hospital attendants, and on the strength of this slight knowledge they are licensed to practise.

PYLORECTOMY.—A successful case of excision of the pylorus is recorded by Drs. E. Goldenhorn and S. Kolatschewsky of Odessa (*Berl. klin. Woch.*, No. 51). The patient was a lad fifteen years of age, who was admitted under Dr. Goldenhorn for extreme dilatation of the stomach following an attack of pain and vomiting eight years previously. The diagnosis was simple stricture of the pylorus, an unusual event in so young a subject; and after due preparation Dr. Kolatschewsky performed the operation of excision. The patient made a good recovery, slightly prolonged by the formation of an abscess at the seat of suture. The portion of the stomach removed included 2.5 centimetres of the lesser and 4.5 centimetres of the greater curvature; the mucous membrane was thickened and thrown into folds, which at the pylorus itself formed polypoid masses, completely blocking the orifice. This condition doubtless resulted from the cicatrization of an ulcer seated at the pylorus, and not from any congenital defect.

NAPHTHALIN IN INTESTINAL CATARRH.—Dr. Holsti (whose work is mentioned in the *Nordiskt Medicinskt Archiv*) has tried naphthalin for intestinal catarrh with foul-smelling secretions. The dose for adults was 0.5 gramme four or five times a day, but it should not be given for a longer time than from ten to fourteen days. For children of from one to two years old he gave 0.12 to 0.18 gramme four times a day. In all cases, both in adults and children, there was an improvement at the commencement. Sometimes there was a relapse, notwithstanding the renewed use of the naphthalin. Dr. Holsti specially recommends it in severe chronic enteritis where other drugs have been employed without effect. He found no injurious effects from its use in adults; in one case—that of a child of a year and a half old—the use of naphthalin in doses of 0.12 gramme four times a day was followed by great anæmia, although the intestinal catarrh was much benefited. Hence Dr. Holsti advises care in the administration of naphthalin to children, especially when given for a lengthened period. He found it fail in two cases.