

importance of this phenomenon both practically and experimentally is very great. Thus, in clinical work it does good service in the diagnosis of typhoid fever, constituting as it does the basis of the 'Widal reaction.' Bacteriologists make use of this phenomenon in the diagnosis of bacterial species and differentiation of closely related varieties.

I have endeavored to sum up as shortly as possible some of the most prominent points connected with immunity. As can be seen there is much left unsaid and much yet to learn, and many are trying to solve its problems and are day by day adding to our knowledge of this fascinating subject, but I feel certain that many years will yet elapse before even its most important features have received complete solution.

SOME RECENT LITERATURE.

Abbot's *Principles of Bacteriology*, 1902.

Bordet. *Annals de l'Institut Pasteur*, Vol. XIII, p. 225.

Ibid, Vol. XIV, p. 257. *Ibid*, Vol. XV, p. 289 and 503.

Gay. *American Journal of Medical Sciences*, May, 1902, p. 857.

Nuttal. *Journal of Hygiene*, Vol. I, p. 367. 1901.

Ritchie. *Journal of Hygiene*, Vol. II, p. 215. 1902.

Walker. *Journal of Hygiene*, Vol. II, p. 85. 1902.

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PASSAGE OF LARGE GALL STONE PER RECTUM.

CHOLELITHIASIS can usually be diagnosticated by the manifest and characteristic symptoms, viz., dyspepsia, uneasiness in region of gall-bladder, actual attacks of biliary colic, jaundice, and sometimes septic symptoms, but the following case exemplifies how obscure are the symptoms sometimes produced by very large stones.

Mrs. H., æt. 55, weight 209 lbs., mother of several children, complexion, light, remarkably clear and fresh, previous health remarkably good.