

chasm between mental diseases and general medicine is at last being rapidly spanned, and much of the advance in general medicine in the next few years will be due to the bridge thus formed. Every physician realizes the value of suggestion, but few have solved the question as to the exact details in which this suggestion is most beneficial and the *rationale* of it. This whole question is admirably discussed in the book before us, and the immense value of psychic treatment in nervous disorders is clearly shown. The sincerity in which the entire book is evidently written is very striking, and justifies what Professor Déferine says in the preface, in the language of Montaigne, "Here is a book of good faith."

The translators deserve much credit for the lucid manner in which they have done their work, and the publishers have left nothing to be desired.

D. C. M.

Arneill's Epitome of Clinical Diagnosis and Uranalysis. A manual for Students and Practitioners. By JAMES R. ARNEILL, A.B., M.D., Professor of Medicine and Clinical Medicine in the University of Colorado, Physician to the County Hospital and to St. Joseph's Hospital, Denver. In one 12mo volume of 244 pages, with 79 engravings and a colored plate. Cloth, \$1.00 net. Philadelphia and New York: Lea Brothers & Co., Publishers. 1905.

This is the most complete and concise epitome we have seen on clinical diagnosis and uranalysis. It takes up all that is necessary for practical clinical work in the laboratory. The directions for the examination of blood, urine, stomach contents, feces and sputum are clear, practical and up-to-date. This little work will be invaluable to the student and busy practitioner.

W. J. W.

Hyperemia as a Therapeutic Agent. By PROFESSOR DR. AUGUST BIER, of the University of Bonn. Authorized translation. Edited by DR. GUSTAVUS M. BLECH, Consulting Surgeon, People's Hospital, Chicago. With eleven illustrations. Chicago: A. Robertson. 1905.

The author makes a distinction between active hyperemia, which is caused by an increase in the amount of arterial blood flowing into a part, and passive hyperemia, which is caused by a diminished venous outflow. He states that hot air is the most useful agent, and that it produces the most active hyperemia.

In Chapter IV., the apparatus used in treatment with hot air is illustrated and described, and in Chapter V., the local and general effects of hot-air baths on the body are given in detail.

Passive hyperemia is produced by the rubber bandage, which is applied above the place to be rendered hyperemic, in several turns, covering each other, firmly enough to compress the weaker