Peaslee-which is, that as soon as symptoms of septicæmia begin, a weak antiseptic fluid should be injected into the abdominal cavity, and then allowed to flow out, and that this process should be repeated until the fluid flows out clear. The septic symptoms will almost immediately disappear, only to return within a few hours, when the antiseptic washing must be repeated. This must be repeated as often, and continued as long, as symptoms of septicæmia become developed. I think that by this means septicemia ought, in almost every case, to be controlled; at any rate, it ought to be recognised that a collection of putrid fluid found in the peritoneal cavity, on making a post mortem examination after ovarian, or other intra-abdominal operations, shows either misconception, on the part of the surgeon, of the nature of septicæmia, or that he has been led away by a false name, and thinks that a piece of rubber tubing, thrust down into the abdomen, is the very utmost the modern practitioner can do to ward off the terrible dangers of septicemia, when it develops in spite of antiseptic precautions.

It may be contended that the name (drainage tube) does not prohibit its being used for antiseptic injections. Of course, this is true, but I am quite certain that the name has led many astray, and that lives have been lost, because the name conveys the idea of drainage, when it should convey the idea of washing out septic matter and destroying its poisonous effect.

I am afraid this article has become too long, but my excuse must be the intensity of my conviction that patients have been lost on account of a misapprehension of the proper use of the misnamed drainage tube, and that by substituting a name which would at once draw attention to what is the only use of the tube, namely, to inject antiseptics and draw off septic matter, a great advance in the right direction would be made.

In conclusion, I might say that it is my firm conviction that the proper use of the antiseptic tube, after ovarian and kindred operations, is of greater importance than the performance of such operations under the antiseptic spray, at least, in the hands of the ordinary practitioner.

## Book Aotices.

The Local Treatment of Eczema. By Henry G. Piffard, M.D., New York.

On a New Modification of the Anterior Splint. By Roswell Park, A.M., M.D., Chicago.

Clinical Lectures on Surgery. Delivered at Starling Medical College by J. H. POOLEY, M.D., Columbus, Ohio.

The American Bookseller for Christmas, 1878. American News Co., New York. Vol. VI. No. 10.

Ninety-sixth Annual Catalogue of the Medical School (Boston) of Harvard University, 1878-79. Cambridge, U.S., 1878.

Fourth Annual Report of the Officers and Superintendent of the Asylum at Walnut Hill, Hartford, Conn., 1878.

Les Tumeurs Adénoides du Pharynx Nasal— Leur Influence sur l'Andition, La Respiration, et la Phonation—Leur Traitement par le Dr. B. Lœwenberg. Paris, 1879.

The Duties of the Medical Profession conserning Prostitution and its Allied Vices. By FREDERICK HENRY GERRISH, M.D. Portland: Loring, Short & Harmon. 1878.

Ecole de Médecine et de Chirurgie de Montreal, Faculté de Médecine de L'Université du Collège Victoria à Montreal.—Discours prononcé a la Récuverture des Cours par T. E. D'ODET D'ORSONNENS, M.D.

Science and Practice of Surgery. By FREDE-RICK JAMES GANT, F. R. C. S. London: Baillière, Tindall & Cox; Philadelphia: Lindsay & Blakiston; Toronto: Willing & Williamson.

The first edition of this work was not so generally known to the profession in this