

tion in the eyes, this inflammation, according to him, occurring sometimes without contagion, and being simply another local expression of the gonorrhoeal infection. 5th, The less frequent implication of the heart in gonorrhoeal rheumatism. 6th, The greater tendency to inflammation of the sheaths of tendons and synovial sacs generally in gonorrhoeal rheumatism. 7th, And lastly, the difference in behavior of the two processes towards the salicylates. Loeb thus considers the gonorrhoeal rheumatism as an infectious process, the seat of infection being the hinder parts of the urethra; and this view receives apparent support from the recent discovery of a specific organism in the gonorrhoeal secretion, the gonococcus. Some doubt, however, still exists as to the specific character of this organism, and hence Loeb is more inclined to think that the cause of the infection will be found in non-specific organisms, examples of whose action in producing inflammation in joints we have, according to him, in the rheumatic affections of the joints which sometimes occur during the puerperium, also along with bronchiectasis, scarlet fever, and dysentery. As to the treatment, it is especially important as quickly as possible to cure the inflammation in the urethra, and especially of the hinder parts.—*D. Arch. f. Klin. Med.*, Dec. 1885; *Practitioner*.

A Peculiar Sputum in Hysteria.—Dr. E. Wagner has called attention to a peculiar sputum often observed by him in hysterical patients, the appearance of which might readily excite the suspicion that a phthisical affection is to be dealt with. But in fact it has been observed invariably as coming from subjects (always hysterical) who show no symptomatology by which tuberculosis of the lungs may be confirmed. The sputum is, of course, free from bacilli, is of a hemorrhagic nature, mostly red, but of a lighter red than ordinary bloody sputum, and not in any way resembling ordinary rusty-colored sputum. When examined in a glass it appears like a reddish or brownish-red pulp, in which numerous small gray particles cover the bottom. This sediment is so characteristic that it is easy to make the diagnosis with the naked eye. In one case