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SOME INTELLECTUAL WEEDS OF AMERICAN GROWTH

BY

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Philadelphia.

In no other country or time has there been such a strange luxuriance of intellectual and social weeds as we are now and here growing on American soil. Any attempt even to sketch a historical review of them would require a volume. It seems impossible in speaking of them to avoid the use of the word crank. Our crankism is such a strange jumble of inconsistencies that there is no old word by which it may so well be named. The patient's diseases are old, it is true, but he seems to have all the old quack diseases all at once, and that makes at least a new symptom-complex. The connotations of the term crank are such that the subject is recognized as not actually or entirely insane, and yet always partially so, sometimes and in some ways perilously near, possibly really over the border line. He is also in some respects sane, or possessed of a cunning that adroitly simulates sanity. To an extent, or as regards some things, he is sincere, in one or two positively fanatical, but again he shows the previous psychologic contradiction of keeping some parts of his brain normal. His mind is evidently constructed on the water-tight compartment plan. All of this is also part of the suggested meaning of the word crank. Again, he is as to certain objects unselfish, in reference to his hobby furiously so: but there is never absent the attribute of a spider-like watching for "the main chance," a highly developed astuteness in getting money from the greater fools who trust him. He is intensely ignorant, and as inordinately egotistic, and all of that is latent in the word crank also. Lastly, "he" is often a woman, and the word must be stretched to cover that noteworthy fact.

The morbid egotism of the cranks is perhaps the most striking thing that appears in all the books, periodicals, writings, preachings, and doings of these strange people. Alienists well know how egotism rules the minds of their insane patients. Mentally diseased the cranks

plainly are, normal cerebration being disturbed and irregular, or more commonly undeveloped and atavistic. Strip the mind of the higher educated and social results of evolution, whether by disease or by utter failure to keep up with civilized progress, and the egoistic instincts, the primal and basic of the *principii individuationis* are all that it has to fall back upon. Ego mania raves and wantons pathetically, but also ludicrously, in every page of these sorry eddyites, "vibratologists," "mental scientists," distant healers, and ranters of a multitude of sub-varieties. The keynote of all the teaching is the infinite value of "I," the unlimited power of it, the eternal emphasis and repetition of it. In the worst cases and magazines the editor becomes one with God, and his sentences for pages are entirely meaningless drivel and word-swash, and one wonders how soon there must be a writ *de lunatico inquirendo* and a commitment to the asylum.

An interesting result of this uprush of commingled egotism and ignorance is that it pretends to be new, while in reality it is the living on of the old dirty medievalism which all historians know so well. One of the amusing characteristics of another "school" of medicine was its claim to be a brand new school, while it affected to look down upon the "old" school of scientific medicine. What was new was the laboratory, the science of the germ theory of disease, hygiene, scientific diagnosis, and the laws of health. What was "old" was the itch theory of disease, the mythical supernaturalism of high potencies, and a re-making of the medieval doctrine of signatures. So in the "New Thought" there is nothing newer than the African's voodooism; in the "New Christian Science" there is no newness, no christianity, no science. In vibratology there is nothing but medieval magic and miracle mongering, and in osteopathy there is only the old English bonesetter's ignorance, plus the old impertinence of the old quack of the olden time. In other words, the entire brood of modern medical crazes and crankisms, while furiously contending that each is new, is in every cell of their being the very demonstration of the utter lack of the new or modern spirit, of the mental incapacity to take it on, or even to see it. Every modern discovery in biology, sociology, and medicine, is ignored. It is the spook of the middle ages ludicrously gibbering in a really new epoch of science, skill, and reason. It is atavism pure and simple; the old barbarism freed by democracy. It is a sequel of a rapid growth of the intelligent in many while the rest, not growing, become the neglected residue of stranded incapables upon our hands. Our punishment is the warning that in the last resort we are responsible for the wreckage. The only way we can abridge the evil is to set about the duty of primary physiologic and social education.

Whenever a quack advertises, the most prominent part of the advertisement, the most of the costly space is occupied by the portrait of the great man. The more a man in the regular medical profession approaches to quackery and secret advertising the more his photograph appears in the lay or so-called professional journals. When vanity or money-making enterprise becomes an outspoken disease this tendency is illustrated most amusingly as well as instructively. In all the literature of faddism and crankery the everlasting photograph appears, and in one journal every contributor's picture heads his article, and each of the dozen "editors of departments" has the inevitable photograph in every week. The *New Thought* advocates and editors are especially prone to this sort of thing. The pictures of "Ella" and of "William" and of "Elizabeth" are everywhere. (They call each other in this familiar way in their papers, so no disrespect is implied here.) Ella's rings and arm are very "fetching," and William's (one of the Williams) stern piercing glance transfixes you with true Hub-bardesqueness. But Elizabeth's photograph would certainly scare away an intending lover, so indescribably terrible is it. "Glasses" would not "destroy that magnetic gaze." She publishes and sells her own books, and praises them too, as straight at you as her photographic eyes would indicate. Each copy of "The Constitution of Man," she says, "is full of power and inspiration," and "contains a speaking likeness of the author." "Experiences in self-healing," "is the latest and greatest of my books" (each is always the greatest), "alive, helpful, inspiring. Beautiful book, good picture of me."

Indeed, the mark of morbid self-consciousness is in every article and sentence of most of the crazy or crank literature so rampant among us. It is not only marked by it, but is rather drenched in it, so that teachers, priestesses, and humble pupils seem to delight in standing and paddling in their own slush. It is an old and well recognized law of disease and insanity that one is unconscious of healthy organs. Most people, for instance, go through life without a moment's attention to their knees, their ears, or their "desires." But let them get synovitis, middle-ear inflammation, or the New-Thought disease, and at once all their attention is absorbed by their knee, ear, or "mind." In all of this literature, "psychometry," fortune-telling, "character readings," "somniaopathy," phrenology, mediumship, "graphology," "astrology," "self-healing," hypnotism, occultism, and a hundred forms of morbid "ministering to the mind diseased" form the staple of "instruction," the substance of page after page of magniloquent nonsense, and more important still, fill all the advertising pages to repletion. The personal answers to correspondents illustrate it to satiety. "How shall I

get rid of the fear?" "How prevent mean thoughts?" "Is the love between the sexes incompatible with the highest mental states?" The jealous wife, "misunderstood woman," misunderstandings with husbands, how to get well, "Soul-mates, the wearing of glasses and the magnetic gaze," bashfulness, the second divorce—these are some of the things the editor takes upon himself to write about to the victims who appeal to him for advice. "Thought-Force" is a book by one of the omniscient teachers, and its purpose is thus stated by him to be:

A wonderfully vivid book answering the questions: Can I make my life more happy and successful through mental control? How can I affect my circumstances by my mental effort? Just how shall I go about it to free myself from my depression, failure, timidity, weakness and care? How can I influence those more powerful ones from whom I desire favor? How am I to recognize the causes of my failure and thus avoid them?

"Can I make my disposition into one which is active, positive, high strung, and masterful? How can I draw vitality of mind and body from an invisible source? How can I directly attract friends and friendship? How can I influence other people by mental suggestion? How can I influence people at a distance by my mind alone? How can I retard old age, preserve health and good looks? How can I cure myself of illness, bad habits, nervousness, etc.?"

"Thought-Force" gives an answer to questions like these.

It is evident that here is a new disease in the world, genuinely epidemic, too. The diagnosis is easily made, but is there any therapist would dare suggest a treatment?

When the history of the outbreak of mental disease which its adherents call "Christian Science," "New Thought," "Mental Healing," etc., comes to be written, it will be found that not a little of the responsibility for its existence rests upon New England transcendentalism. As regretfully as one may say it, Emerson is their favorite philosopher, or was once so. Of course, neither this noble man, nor that popular movement, is entirely responsible for the present day examples of mental degeneration and disease. So far as one can learn, these people have no care for anything outside the dizzy whirl of their monomaniac ideas, or preferably, lack of ideas, and far from knowing anything about so ancient a person as Emerson they reckon not and know not of any interest except "vibralogy" and the repetition of a meaningless lot of words. In one or two instances there is a glimpse of the fact that they have a vague idea of an outside world, as in Wilmans', for instance, but it is only of the world of phantasmagoric newspaper science (as, *e.g.*, "a life powder compounded by a Chicago physician to revive dead animals") taken in all seriousness. In one or two things all are united—in treating disease by "absent or distant treatment," and getting money therefor, in hating doctors, and the "postal underlings" (for excluding their purely commercial fraud

journals from the mails). All agree the Cain of the primal couple was sired by Quimby and dammed (*absit omen!*) by Mrs. Mother Mary Baker, etc., and the parents were only "spiritually" married! But the accident of names is as nothing. All names sit lightly on the consciences of these ladies. So under any other names the epidemic must have come. The conditions were such that the result was inevitable.

The psychology of eddyism, best illustrated in the latest sectarian degenerative end-products, is familiar to all alienists and students of insanity. A healthy mind cannot read the so-called "new thought" journals for an hour or two without the overwhelming conviction that these people are really insane. The wonder is that they have preserved so much commercial cunning. The money aspect, pay-in-advance for reading notices, for absent treatments, for "psychometric readings," for books, for "vibrations," for insuring "success," for shares of mining stocks, for letter pads, for journals and lectures, and all that—this is never forgotten. It goes on, however, at the same time and in the same columns with the dreariest waste of reverberating words, words, words,—utterly without meaning, and utterly without end. There are tons of such printed stuff as this going out every month:

Unity is Non-ethical. It simply is. God is! Energy is! Power is! Light is! Life is! Thought is! Love is! Attraction is! Electricity is! Man is! Existence is the beginning of our search for happiness. Existence is non-ethical. It is a mistake to call God good.

I see that my strength is God, and therefore I know no weakness or tired feeling. I am eternal energy. My peace is God, and therefore I am eternal harmony. All presence is God, and there is no presence of sin. All existence is God, and there is no existence of evil. I affirm the allness of truth. I am the truth, for there is not anything for me but truth to be. I am the whole truth, as it is undivisible unto parts. I see that I am truth and all goodness there is. I can not be sick for my life is the almighty.

Grammar and spelling are matters of indifference also. Prior to Mrs. Eddy, the fashion of scorning the accepted meanings of words, had been well set by inflamed egotism and transcendental enthusiasm. But to call an unfaith "Christian," and an idiocy "Science," was left to that daring lady and her followers. The habit of misapplying words, of making any word express any fact at pleasure, is characteristic of insanity, and when words themselves lose all meaning and become a jargon of monologue—then the end is not far. In the same sequence of sentences, a mental healer will claim that all drugs are violent *poisons*, *POISONS*, *POISONS*, and that they are also inert, dead, wholly without effect on the system. Left without support of religion or government, relieved from duty and poverty, with not a scrap of knowledge, the wrecked mind must feed upon its own vanities and fancies, call itself God, and sell "healing vibrations," "cash always in advance."

In commercial medical journalism, the owner-publisher will usually allow his professional servant-editors and contributors sufficient freedom to write about their little professional matters, as they please, providing, they do not interfere with his advertisements, reading notices, ways of making money, etc., and especially if they, the editors, annually accept a sufficient number of articles lauding advertised preparations—there must not be too many, or they would excite suspicion and destroy professional support, but they must not be so few—and, heavens, not none at all!—as to discourage advertisers. It is strange how this same problem presents itself elsewhere, and even in the divine and inspired journalistic organs of the popular new religio-metaphysico-medical crankeries, multitudinously named. In these periodicals, the advertisements are not confined to any certain pages or parts of pages, and the publishers of the books of the editors fill their own reading columns with reading notices, and puffs, as unblushingly as the worst of our enormously circulated “medical” journals. In one of the most successful of the crank journals, the editors sing their angelic songs of science and drugless healing, in charming ignorance of interspersed pages by the publisher (who plainly has his way with every column as he will) in praise of his Food Company remedies, his Tobacco Company, his Iron Ore Company, etc. He frankly confesses, his journal subscribers have subscribed many tens of thousands of dollars to his business enterprises. He is evidently a very astute promoter.

When one makes a study of the earlier weeds of morbid psychologic literature and sects, and after he has grown tired enough of Mother Mary Baker Glover Patterson Eddy and her children, he will next come upon the “New Thought,” represented best by a journal of that name, edited by Ella Wheeler Wilcox and William Walker Atkinson. (In proportion to the fame of great ones, the entire set of names must be spelled in full.) The perusal of a half dozen numbers of this periodical will only take an hour or two, and although so far of much interest, and instructive, one will then begin to tire of the thoughtlessness of the new thought, and of its oldness, and especially of its puerile and repetitive lessons. One will get a wearying conviction that if, as the publisher avers, there are 100,000 subscribers who find this childish stuff adapted to their needs, then surely the schoolmaster is not abroad in the land, or he is not doing his duty very thoroughly. Had we space, we would like to reproduce a few hundreds of excerpts we had marked. There is nothing directly vicious or nauseating about it, as is so common in other forms, but it is, of course, indirectly morbid. The people who are ministered to, and treated, are surely sick, very much so, mentally and socially, but the teachers, the high priestesses, and their little amen-sayers, the priests, are surely much “sicker.”

One thousand dollars were given, in fourteen prizes, by the publisher of *New Thought*, for the best definition, within ten words, of "New Thought." The following were the definitions, winning the prizes—the first of \$500, the second of \$250, etc.:

Being and doing one's best by repeatedly affirming one's ability.
 We are what we assert ourselves to be.
 Claim that you are what you desire to be.
 The cheerful, persistent assertion of the soul's prerogative to rule.
 Continuous affirmation of whatever helps us achieve our highest possibilities.
 Attaining the ideal in life through thought concentration and assertion.
 Mental imagery, personally controllable, governs bodily health and individual circumstances.

Holding constantly before one's thoughts the omnipotence of man's mind.
 Human development through recognition and assertion of human divinity.
 The control of mental force by positive, concentrated, ideal suggestion.
 Realization of ideals by becoming them through force of desire.
 Benefiting or injuring others and ourselves reciprocally through thought force.
 Fear nothing; love everything; believe you can do anything.
 The recognition, realization, and manifestation of the God in me.

It seems, therefore, that the more one claims, regardless whether he has it or not, the more egotism one cultivates, the more one ignores facts and lives in indifference to them, the more one ignores disease and treats himself, or hires "absent treatment," by means of "vibrations,"—the more one "realizes the God in me."

One of the "New Thought" journals is called *The Nautilus*. Holmes' poem will be forever spoiled for anyone who has ever read this periodical. "Build thee more stately mansions, etc.," is the motto of the title page each week. One of the recent numbers devotes a page, or more, to the thesis, that "The root-cause of all so-called self-consciousness is really self-unconsciousness, a lack of self-knowledge and self-valuation." So morbid has morbid self-consciousness become, that it is even encouraged as a virtue. Vanity is here deliriously inflated. A praised illustration, that extends through the columns of one of the articles, is that of a girl, who spent her life in practising poses, facial expressions and tricks of speech before a mirror, cultivating blushing, as she had learned it was pretty and becoming, etc. We are informed in the fourth column, that "self-knowledge includes a knowledge of the universe as a whole, and of every human being as a part of the whole." *The Nautilus*, according to motto No. 2, is "devoted to the art and science of self-expression." Ida C. Craddock (arrested for abuse of the mails with obscene literature) is called editorially "a sweet, earnest, clean soul, who chose, for the sake of forcing her teachings upon an unready world, to butt her head repeatedly against the stone wall of the law, etc." One of the editor Elizabeth's new, greatest, latest, most inspired books, "Just How to Wake the Solar Plexus," explains—let us say everything, but chiefly man's relation to the sun,

shows what the solar plexus is to the human body, how to control emotions and thoughts, to develop concentration, kill fear, etc., and to insure the attainment of a strong poised selfhood. The advantages to purchasers is shown by testimonials; we have space for only one:

J. F. WILLIS, BRECKENRIDGE, COLO., writes:—"I received more special benefit from one reading of 'Just how to Wake the Solar Plexus' than I have during a period of ten years with medicine chest and doctors' bills of over \$800, aside from much time lost."

The editor prints the following letter from a subscriber:

I am enjoying a vacation and rest from all care and responsibility, where my friends hope to cure me of my belief in astrology—the best place I could ask to be in for study and observations of extremes of character, etc. Please send *Nautilus* here. *Others here as well as myself will appreciate it.* X. Y., Manhattan Hospital for the Insane, Central Islip, L. I. [Italics not ours.]

Of "Elizabeth Towne's Experiences in Self-healing" she herself says:

Those who want real experiences in the new thought and its application will find this book a mine of information. I have shown plainly just how I grew up in new thought, healing myself of almost every imaginable kind of disease from heart trouble to the catching-cold habit, from all sorts of chronic and acute things, and from all sorts of faults of disposition and temperament. I have described every method I used in overcoming not only diseases mental and physical, but poverty as well. And incidentally I have described at length the methods I have used and evolved in the healing of others as well as myself. Not a thing in my experience have I glossed over or omitted. The book is an inspiration and has been written in a white glow of purpose to reveal a soul's efforts and progress and accomplishment, to the end that other soul may see and understand and be inspired to greater self-conquest and self-expression. It contains more of me than anything, or all things else I have written.

To cure asthma, beside vegetarian dietetics, "mental breathing," and physical ditto the patient is instructed to read "Solar Plexus" book every day for a month and get into the spirit of it and shine for dear life all the time! She is to stand or sit straight, chest out, and breathe down and out, taking pains to hold the breath and then let it out more slowly and evenly than she took it in. With each breath she is to mentally affirm, I am whole, or I am love, or I am power—using one affirmation for each day. "Solar Plexus" book tells how. Above all and in all she is to wake up and go at it with a will. To put will into bodily action is the cure for asthma. Will is just what an asthmatic is averse to using, will and persistence. Asthma means a curled-up will and it is not easy to uncurl it.

Baldness can be cured:

Perhaps you will ask me "what thought you are to hold" for dying hair. This item is written presumably for those who have been "holding the thought" without apparent results—as I did for several years. Then it came to me that I must supplement "the thought" with action. So I went to studying causes and thinking out what to do. I've been doing it. Faith and works will accomplish anything. The only thought to hold for dying hair is the thought of life. Keep thinking it right in with every rub of your finger-tips until it gets to thinking itself without special effort.

The following questions and answers of puzzled correspondents are to be noted:

"When you treat yourself for a cold who is doing the treating, the objective or subjective self? Does mortal mind tell the spirit to do so and so?" B.

There you go calling yourself a "mortal mind." You are immortal mind. When you talk or treat it is immortal mind, talking or treating—talking to itself and treating itself.

"When you pray is it the God in you talking to the Universal God?" J.A.
Ye gods, no! It is the Universal God talking to himself. You are the Universal God. Crawl up out of that little tadpole you and spread your wings in the Universal.

"I wish you would have more to say about treating."

Why, everything I say is "about treating," and everything is a "treatment." Everybody on earth is treating all the time. If he isn't treating for health he is treating for sickness; if not for happiness, then for grief; if not for wealth, then for poverty. Every thought is a treatment, and every individual has the power of choosing what he will think. Choose ye this minute what you will "treat" for. Treat yourself and your relatives and the whole world, etc.

"*The Success Circle*" is the title of an enterprise thoroughly advertised by *The Nautilus* and its editor, with the incomparable photograph attending. It says:

The Success Circle is designed to aid all who are seeking to better their condition by understanding and applying the laws of mind. It is simply a very large class of students who are being taught, through my writings and my silent Word, the principles of success; who are coming into touch with me and drawing inspiration to go in and win for themselves. What I teach I know. I have practically demonstrated every step of the way, from a state of dependence, to one of freedom and power to command. I know how I did it and I can tell others how. I teach by the Word (i.e., statements of truth) printed in my book, "How to Grow Success;" printed in the monthly letter to the Success Circle, published on page seven of each number of *The Nautilus*, and conveyed telepathically to the members, whom I treat individually and collectively. Water is free to all, but if some man pipes it to your kitchen sink you have to pay him, not for the water, but for the piping. I have piped the Word, the creative power of the universe, and I offer it to you as the printed Word, in my book and paper. For these I ask a reasonable price. You pay for nothing but the book and paper. For the Word conveyed telepathically I make absolutely no charge. My silent Word, or statement of truth, goes out to all the world, and whosoever will may receive and vibrate with me for the upliftment of himself. Each copy of "How to Grow Success" contains a three-quarter length portrait of the author, and is signed and numbered in my own handwriting.

As to the success for the author of the Success Circle there is no question; and none, according to the testimonialists on their part. Mrs. Jones's health and "good looks have improved 100 per cent.," and "Mr. Jones's business is everything we could wish for." It brings rain and good crops to Mr. and Mrs. Joseph Jackson, of New Athens, Ill., when their neighbours have none. Mr. Ridout, a land agent, of Bruce, Wis., writes:

The year previous to joining the Circle was quite uneventful in a business way; it started on a jump the very day I got your receipt for the money sent to join the Success Circle. Note that I am in the real estate business, and I sold more land the very day I got your receipt than I had sold in the six months' previous, and nearly every day since I have had all the business that I could attend to. People marvel at my success. My daughter found employment the very next day after getting her receipt of membership.

Dr. James W. Cormany, Mt. Carroll, Ill., says:

I am getting every one I can to join the Success Circle. I have increased my business 50 per cent. Now that "ain't to be sneezed at," when I was doing a good business before.

Even electricity obeys the all-commanding Elizabeth, for C. E. writes:

I am happy to say I am succeeding in the line of my desires since joining the Success Circle. Am night watchman in a large manufactory, and some of the machinery is kept running all night by electricity. Now I have noticed that when things go wrong with the electric current or the machinery it is when I am out of tune myself. So now, when I find myself raking over old troubles or dwelling on wrongs, real or fancied, I say to myself, "Look out, old boy, some of this machinery will be catching the melancholic and making trouble for you." Then I pull myself together and look on the bright side.

Without comment, and properly so, the editor of *The Nautilus* copies the following from the *Boston Herald*:

Tenderly she laid the silent, white form beside those that had gone before. She made no outcry, she did not weep. Such a moment was too precious to be spent in idle tears. But soon there came a time when it seemed as if nature must give way. She lifted her voice, and cried long and loud. Her cry was taken up by others who were near, and it echoed and echoed over the grounds. Then suddenly all was still. What was the use of it all? She would lay another egg to-morrow.

Another of the "New Thought" periodicals is called *Freedom*, and is said to be of "Realistic Idealism," published at Seabreeze, Florida. We cannot give the editor's name, for she—it is, of course, a lady that edits such journals—has a multiplied personality and many names. These are some of them, scattered everywhere through the samples before us: Wilmans, Helen, H.W.P., Wilmans Publishing House, Helen Wilmans Post, Helen Wilmans, No Signature, etc. Financially Helen seems the most successful of all the New Thoughtists, Mental Healers, or whatever name one should use to describe them, and there are occasional glimmers of sanity to be found in her paper so that one may be hopeful even of this large class of the American people and of their mental convalescence. The greatest of the complaints of Helen and of her publishers and contributors is of Postmaster-General Madden. The violence of the language against the "postal underlings" of the Government for excluding *Freedom* from second class rates is unworthy of the divine people for whom "there is no evil." And all this in the same issues which contain the legend, "entered at the post-office as second-class matter." It is incomprehensible. The papers "muled" or suppressed, it is said, are "those devoted to the promulgation of ideas not in harmony with the postoffice officials." This seems unnecessary, and contradicted by the columns of reading notices and advertisements of the editor's and publisher's business enterprises, books, lectures, etc., a column or two of one editorial being devoted

to the publisher's Letter Tablet, price 25 cents. The editor's financial ability is thus spoken of in her own journal:

Mrs. Williams Post claims to have mastered poverty by using her power to think; that by concentration of thought on money she has drawn wealth to herself as if to a magnet; and certainly her large financial income and magnificent properties in Florida give indications of her success in raising herself from a condition of most abject poverty to one of unlimited opulence. In her famous book, "The Conquest of Poverty," she sets forth her *modus operandi*.

Has Helen attended the school she advertise—"The Washington Sanatorium and School of the Art of Attracting Opulence?"

Like all these descendants of Dr. P. P. Quimby, of Maine, plus Mother Mary Baker Patterson Glover Eddy, "Freedom" most of all things, hates medicine. Its pathology is as naive as would be expected of those who do not believe in matter or disease, and who have never studied any other kind of science than that in Chicago daily yellow papers. "Chronic disease is the gradual accumulation of dead matter, etc.," and "sickness is an effort to cast it off." "The effort in all cases of healing is that of the mentality, or spirit, endeavoring to free itself from the accumulated beliefs of the ages, etc."

It is thought alone—the right kind of thought—that has the ability to cast every element of decay out of our bodies by quickening the springs of action within them. Is the liver torpid? Thought can cast out every obstruction to its perfect action. Is the heart sluggish and the circulation slow? Thought can remedy this. And so of every organ; and with every organ renewed how can it be possible that the whole body should lag behind in sickness and distress, and how should it die? We know positively that thought can renew the various organs in the body.

Renewing organs by thought, is however, a small part of the claim to omnipotence. Helen says that she has an "entire conviction in the ultimate conquest of disease and every form of bodily weakness. This leaves us with the perfect right to assert the possibility of conquering old age and death; and I want it understood forever that I do assert it; that I believe in it with my whole mind, and that I work for it with every breath I draw."

Alopaths (it is always spelled so) and homeopaths, all drug-givers, and such despicable folk are "on the run," and, "Medicine is played out. Every new discovery of bacteria, shows us that we have been wrong, and that the millions of tons of stuff that we have been taking was all useless." "Any drug is a poison. Anything that cannot be digested and assimilated into the body is a poison. The drug has no power of action at all. It is utterly dead." What Helen and company understand by "doctors" may be gathered from this:

I have taken it upon myself to interview some of the persons whose pictures have appeared, with statements over their own signatures that they have been healed; and invariably I have found that the person was not healed at all. One man in this city, when I asked him why he gave his picture and statement which I saw in a daily paper, replied:

"Well, they took me over there and washed me out and filled me up with stimulants and electricity until I felt so good I thought I was healed. While I felt so well, they put the statement, you saw, under my nose for me to sign, and got my photograph. But after I had been home two weeks I was worse than ever I was before."

The faithful healer, however, is thus encouraged, thus encourages herself, or himself, or itself:

What matters if others reject you when you have once perceived the wondrous potencies of your Personality, the Shrine of the Infinite, the Tabernacle of Genius?

Another Journalistic illustration of the new miracle-mongering, is called *The Golden Rule*. It exemplifies the fact that "Christian Science" is a great promotor of that type of insanity which is not inconsistent with financial cunning. This journal claims 10,000 readers, and even if this is not true, the ability to pay the printers' bills on the part of the hundreds of these wild and morbid periodicals, tells of the vast amount of such mental alienation and of how near a great part of the race is to absolute insanity. It is plain that we may not safely ignore the fact, and that "smiling it aside" is not wise. From page after page of *The Golden Rule* not a hint of real thought is to be grasped, except when it comes to the "cash in advance" commands, and then it is all very clear and business-like. Two brothers seemingly edit, but it is "I" that speaks, very ungrammatically, but as "I" says, "graffically" We cannot spare space for interesting examples of psychopathic word-rubbish, in which Brother "I" proves himself divine, and more; that "the universe is a man, male and female;" that "the universe is my institution, I heal the sick, etc." When "a devout member of organized religion," he-they got "catarrh of his head and stomach in fighting the devil, and other troubles," but "when truth came to his vision," he ceased to deny "his desires for tobacco and dancing."

I kept on eating everything that my appetite craved until there was perfect agreement established and my stomach trouble was cured. To my catarrh of the head I said, go ahead if there is something about my head that needs to be taken out or destroyed, I want you to do it. I am Spirit and nothing in heaven and on earth can hurt me. I have healed all kinds of diseases and casted out devils. Every day I am laying hands on the sick and they recover. I have taken up serpents and drank the so-called deadly poison and it did not hurt me. I speak with a new tongue in the way of explaining the Truth. Not only have I casted out devils out of one or more persons but out of the whole universe.

I think infinitely. There is no limit to the harmonious power of my life. I help people far and near.

Terms for treatment is five dollars per month, cash in advance.

RATZLAFF BROS.

"M.D.'s are requested not to send him-them their circulars, and telegrams and cablegrams are not desired, as he-they are so "busy giving treatment, till late at night, for all kinds of diseases, including poverty, and writing letters. Five dollars per month in advance." Mother Eddy has much to answer for.

But the *New Thought* has a still *Higher Thought* which is said to be "a journal of Realization," with the motto, *Ye are Gods*. In praise of its foremost writer of the foregoing issue it says he has been a "jack of all trades" and has done almost everything—"carpenter, gardener, homesteader, herder, hygienic physician, pioneer in Kans., Tenn., and Fla., book-agent, farm-laborer, orange-grower, poultry-farmer, professional nurse, newspaper-correspondent, story-writer, poet, editor. At twelve was a dreamer on Socialism, at thirteen an Atheist and in a few months converted, and by rapid stages Calvinist, Armenian, Swedenborgian. At one time a revivalist, later a working student in a hydropathic college. Became Agnostic about twenty-one and remained so till receiving the illumination of the Dawn Thought."

"The next symposium" is to be on "the sex question." It all finally comes back to a question of "health and disease" with these wonderful metaphysical, supernatural journals. One would suppose all the "Gods" (the "editors"—and their "patients," who also are "Gods") were in a strangely bad state of health, although each one of them is "the perfect idea of perfect mind." "I am all; I have all; I know all, for I am the likeness of all; all is now." "Health is the direct result of harmony and harmony only exists through agreement or oneness." "I want to tell you," says one correspondent, "that spiritual poise is all right." "Highly successful in treating absent patients;" "distant treatments for health, wealth, and success" are advertisements of other "healers," and Weltmer has come into the Higher Thought! Weltmer is one of the "Gods," with all the other advertisers of "drugless science," of "Realization," of "Books of Health," "Breath of Life," "The New Man," "Purity Journals," "Free Healing," "Life's Great Healing Law," and all the rest!

Health is sought so avidly by the self-conscious cranks as to indicate a sad state of disease in them. One of the sects is called *The Ralstonites*. This is no cynical name bestowed by enemies, but one they give themselves. The book before us is entitled *General Membership Book of Knowledge of the Ralston Health Club Leatherette Binding*. On the title page it is said to be (84) eighty-fourth (84) Edition (84). It is the first attempt so far as we know to build up a secret organization in health-study or health-practice. "If there is any secret society about I want to get on the inside" is the thought which has preceded many strange gatherings of men. There are many degrees of wisdom, at least five, although "hundreds" are spoken of, the "Inner Circle," "personal magnetism clubs," etc. But there are dire punishments for betraying secrets, not keeping pledges, etc., and one is made to feel that invisible detectives and spies are dogging one's footsteps. "No

subterfuge or indirect action will remain long undiscovered.".....
 "It will sooner or later be discovered and will cause the loss of all rights as a Ralstonite and the loss of respect in the community." The loss of "all rights as a Ralstonite" must be a serious matter indeed, judging from the following quotations:

"No one pretends that there is any other channel of help to mankind except that offered by Ralstonism."

"We believe that Ralstonism is the lever that has been designed by the Creator for the work of uplifting the world."

"For a quarter of a century the great cry of Ralstonism has been its determination to create a new race of men and women."

A few thousand years ago, says Mr. Ralston, men lived to be centuries old. Such is the anthropology of this scientist. "Glame" is the word he has coined to designate the form of health-vitality. Such is his philology. There are 2,237 maxims listed in this book with "leatherette binding," which constitute the most amusing mess of nonsense, a seriocomic gathering of dietic and physiologic "tommyrot" beyond compare. Antidrugism sticks out everywhere. Let examples speak:

Perfect flour-making is rapidly spreading under the name of the Schweitzer system.

Wheat, being a perfect food, was the first cereal on earth.

Onions tell if the bowels are out of order.

Diabetes is the turning of the blood to sugar.

The vegetable kingdom includes everything not in the animal kingdom.

Honey is about one-eighth flesh.

A well-known man who was very fond of sucking pig has recently died a horrible death from cancer.

Eaters of lamb meat are of gentler dispositions.

Meats give brain power, but will not build minds.

The excretions of ministers after sermons show that a thinking man excretes more phosphorus than a laborer.

Dried herring dries up the blood.

Consumption is often due to iron.

All water comes from the clouds.

Nearly all cases of typhoid are due to well water.

Hot milk snuffed into the nose has cured catarrh that defied all medical aid.

The natural treatment of catarrh is different and is in Ralston Franchise at Fifth Degree.

Failing eyesight can always be prevented.

Glasses may be discarded by restoring the eye to its true shape. "Ralston Gardens" describes the treatment.

The optic nerve is weakened by too much starchy food.

In diphtheria, lockjaw, and other torturing maladies the agonies inflicted by germs are unnecessarily excruciating, malicious, malignant, cruel, relentless, satanic, and devilish.

The body is part of nature's general plan.

The faculties should remain stronger than the functions.

The sunrise sky is the golden field of hope.

The sunset sky is the rich meadow of peace.

In the last decade of the last century Ralstonism reduced the death rate by 10 per cent. in general.

We are sure Mr. Ralston is correct when he emphatically says "Ralstonism can never die." Neither will morbid ignorance. Seriously meant fun and selling \$25 books for \$4.44 are also eternal.

Not only the *New Thought* but these uncouth faddisms are generally based upon the healing business. *Christian* is the name of a "New Thought" periodical published in Denver, Colorado. The New Thoughtists praise it as illustrating the humorous aspect of the faith. With avidity, therefore, one seeks some relief from the solemn earnestness, serious as an insane ward, of all the other journals and writings. The intent and conscious purpose, it must be emphasized, because unintentionally and unconsciously they are far more mirth-provoking than any writing of Mark Twain. The editor of *Christian*, we suspect, would not claim any christianity for himself or his periodical—the "humor" may lie in that—although he tells us he is an "ex-preacher." His wife, of whom he is always writing in his editorials, he says, is an "ex-actress." Regretfully one must confess the humor, if intended, is not present. It is all as dreary as a "comic opera." Of the intended kind the constant calling of his readers "sweetheart" and "darling," and the iteration of such colloquialisms as "in the soup," "bucking against the postoffice department" (Mr. Madden would not let him in), "Shake, my dear girl," "Let him have his jimjams," etc., are illustrative. From a most serious "poem" occupying the whole front page, and composed by a famous member, three disconnected lines should also be excerpted:

"Tinkering of thoughts tobasco."

"Free from mustard meditation."

"Not a new food, nor a long-stunt."

Because there is so little fun in our own or in any method of "Healing," we reproduce a few extracts from the last number of *Christian*. The editor of this periodical should be encouraged because, however unwittingly, he is bringing the eddyistic and vibrational healing business to its legitimate and logical *reductio ad absurdum*. The editor and healer writes:

Give the healer a fair chance, and don't mix mental methods. The other day, a lady wrote, complaining that she did not improve. She said she had written to C and B and A and M at the same time that she wrote me, and had put her case in the hands of each of us. Five healers! It is a wonder she isn't dead or crazy! It is unfair to all of us. Mental medicine should not be mixed. I want you to myself or not at all.

I am the light of the world. I am all the light of the world. I am the light in the jack-o'-lantern and the light of the lightning-bug and the light of the sun.

The leaders of this modern metaphysic movement have not not made good in the way of healing themselves and others. Ostrich-like, they stick their heads into the sands of sect to hide their defeat.

The so-called New Thought is smelling a little musty. Throw it away, even if your old body should go with it.

Don't blame me if all the beautiful women on earth flock to *Christian*. It is by the law of attraction, for the I am is "the fairest among ten thousand, and the One altogether lovely."

Christian has had to fight for every inch of ground. It is now the only periodical of its kind on the planet. It is denied second-class postage because it is the

voice of the Free Spirit. Let all who are going to die prepare for death. I am here to stay. I defy disease, death, and the devil.

Christian is given five distinct treatments before being sent out in the mail. My wife and I transmit to its pages all the power and glory and love of our own lives. It is our kiss of love to all of you!

Baby Blanche is busy with health, but when she needs a doctor, I will not hesitate to send for one.

The new thought public had rather read how Thomas Jefferson Shelton actually cured himself of corns than to peruse the finest strung, theoretic article which the sedate and saintly *Essence*, or the grave and ministerial *Mind*, or the Puritaical *Ideals* is able to produce.—[*The Nautilus*.]

Some time ago an enterprising healer of the Southwest gave much amusement to his friends and enemies by instructing patients all over the world to lie down exactly at a certain hour of the day, and at that minute the absent healer would think of them and send forth the miraculous vibrations to cure each according to his receptiveness and need. The man had forgotten or had never heard of a complicating difference in time between the clocks of Kansas and Maine, San Francisco, and London, whereby his vibrations, instantaneously transferred, would not arrive at all on time. In the latest number of *Christian*, the editor, on page 8, says he is sending out 30,000 copies of his paper every month, and to each person he also sends the healing and success vibrations. Also, on page 8, he says the name of each of these 30,000 persons is "called every day in the healing-room." It is strange that the miracle-worker forgot his multiplication table. If at a high rate of speed of the caller, and a still higher rate of the vibrator, surely not over 30 names could be correctly read and called in a minute continuously by one caller. The "healing" would, of course, be easier. At the auctioneer's best, 1800 names an hour would severely tax the larynx and would be extraordinarily good business. Thus to get through the 30,000 names each day would require at least 17 hours of uninterrupted "calling" and healing. And yet this particular advertiser is the most sane and rational of the entire multitude of these curious people.

VALEDICTORY ADDRESS, 1904,

BY

F. J. HACKETT, M.D.,

University of Bishop's College, Montreal.

My first words shall be of welcome; welcome to the professional arena in which for the future your best efforts will be put forth in the struggle against the many ills, which afflict the human body. Speaking for the Faculty, and in a wider sense for the entire body of medical men, I extend to you the hand of fellowship, and henceforth, in virtue of the powers conferred by this convocation, you take your place as equals

amongst those who are seeking to help the sick and define and combat disease. The line of demarcation between pupil and teacher has been erased, and we stand now upon the common field of endeavour in the treatment of disease. These words of greeting should gain in cordiality, when coming from one, who, like yourselves, took his degrees in the convocation of the same body, which grants you yours to-day; one, who has during the course of your studies contributed little, it is true, to help you in your ascent of the path leading to a knowledge of medicine. You have advanced step by step, and to-day stand on an eminence from which you can look backward and review the events, which have followed one upon another, leading you to the crowning event of this day; and forward, looking to the future, wherein you are to put to use the principles and rules of medical science and art, which you have acquired during your sojourn amongst us. I, therefore, also welcome you to the ranks of those, who are bound together by the ties of membership in the same University.

Students you have ceased to be in the technical sense of the word, students in the broader and equally true sense of the word you will, I hope and believe, continue to be to the end of your lives. Your experience in fact will be very different from that of the majority of your brethren, if after a few years in practice you do not feel that you have learned more of your profession since you became qualified, than you did before.

At present, no doubt, the feeling uppermost in your minds is one of thankfulness, that you have come to the end of what at one time seemed an interminable series of examinations. We are pleased that you have passed them all with honour, and that in the various tests to which you have been subjected you have given promise of being able to cure or relieve the sick and competent to apply the teachings of science to the mitigation and prevention of disease. On such broad lines have you been tested, and in this school such is the object of examinations which we keep in mind. A medical examination should not be used to try a man's mental agility and alertness, his power of rapid and correct expression, nor should success depend upon command of self and presence of mind amid difficulties. Many a good man would fail under such a test. It should be directed to appraising professional skill, only this and nothing more.

At the outset of your medical career, pardon me, if I tell you that the practice of the medical profession is not a life of ease or luxury. Be not deluded by those who would have you content with "glory" or any other philosophical abstraction. Little good is done by constantly

drawing a distinction between the medical and other professions; it is a false doctrine that would put our profession on the pinnacle of the human temple, with the lawyers, authors, artists and others below. In fact it has often been said that, the study of medicine is much nicer than the practice of it. The eager student, who, day by day gleans some new facts, when they have all the relish of novelty, tries to give to these facts their proper significance and importance, and following his teachers, his reading, his authors, has the pleasurable sensation of intellectual satisfaction, which his opening mind feels, as the truths and laws of science grandly evolve and become clear to him.

The eager and earnest practitioner, on the other hand, when he comes to apply his knowledge in his professional life has to assume an altogether different mental attitude. He no longer may follow his teachers, the sense of personal responsibility is upon him. You will sometimes feel when you have an anxious case on your hands, the overwhelming power of this sense of responsibility. You will then realize what it is to have in your hands, depending on your decision, the issues of life and death. You will find that you will not have one hour out of the twenty-four, which you can positively call your own, in the sense of being free from the chance of interruption by a professional call.

Only enthusiasm and love of your work can make these things endurable. If you have these, you will respond with pleasure and promptness to any call at any hour. You will have before you the prospect, that this new case may afford some unusual manifestation of disease, that in your treatment of it you will learn something new, that it may afford an occasion of carrying out some method of treatment in accord with the latest advances in therapeutics; or again, to some whose enthusiasm may carry them so far, should all efforts be of no avail, there will remain the opportunity of establishing with certainty its pathology.

Your work will be undertaken and accomplished in a spirit which will make the task light. You will communicate your enthusiasm to those about you; your earnestness will be noted by your patients or those interested in them, and do much to assure to them ease of mind, feeling that they are in good hands.

Reverses you will meet, they are not more frequent to medical men than to others, your enthusiasm will carry you past them, then you will have successes, and to the medical man whose soul is in his life's work they will bring especial satisfaction.

Looking into the future, I have in my mind's eye that one of you has attended a little girl, loved with intensity by a good mother, stricken with a serious and dangerous malady, one which has caused

her to lie for days on the brink of dissolution. To her friends the shadow of death seems to darken the scene, you do not notice these things, you are not cast down or depressed, rather are you stimulated to further effort. You notice with a keenness born of earnestness in your work, and devotion to your patient, all the symptoms of the case. During the days of your attendance she has ceased to be only a case; the little one has entered in your affections. You think not of loss of sleep nor of fatigue. By and by the shadows lessen and things brighten, and one by one the various signs of health and well-being reappear. Where was pain, there is now comfort; where was restlessness, there is now rest; intelligence has returned, and dulness of expression and countenance have given way to a laugh and a smile of recognition.

By your unremitting care, and the interest which you aroused in those whose duty it was to work while you were away, you contributed much to save your patient from death. You have earned the life-long gratitude of a child and its mother. Then there will come into your soul a sense of satisfaction and pleasure, which some time or other comes to all of us, a feeling which no fee, however large, could ever arouse, and you will know then that you are a member of a profession in which there are other compensations than those of money.

The practice of medicine has been described as one of the mute arts. By these, I would understand that its practitioners in all times have pursued their calling in a quiet and noiseless fashion, not seeking nor challenging the approval of the masses, rather seeking the good opinion of their fellows. Less brilliant, less tumultuous than some other professions, it has, however, been of every day usefulness. Fortunate the community that has among its citizens one or more physicians or surgeons, who by their energy and devotion to their practice give to their fellow men all the advantages which our present knowledge of the healing art has in store for them. A good Doctor of Medicine is one of the most precious assets of any community.

A work in which philanthropists may engage, it is one which the state should undertake, and this to its own advantage, because nothing is of more importance to any country, than that its citizens have healthy bodies and sound minds. Proper facilities for the training of such men should be furnished, either in institutions of its creation, or by granting from the public funds assistance to institutions in existence.

Passing from matters of a general nature to the subjects of more present interest, I would venture to say a few words on the tendency,

when you have entered upon active practice, of becoming absorbed in your routine work and neglecting the cultivation of the mind. None of us is strong enough to bear with impunity the strain of professional life without some kind of mental recreation; this is necessary in order to save us from narrowness of only a medical view, and that partial atrophy of the mental faculties that comes of disuse.

To some this divergence from the professional path may be that of incursions into some department of general literature; others may adopt some branch of the natural sciences as a relaxation and change in mental activity.

You should strive to so enrich your mind, that you will not only know how to do your work, but will also know how to enjoy your leisure; moreover, to such of you as may reach the time, when your working days are over, that you may be provided with an unceasing source of wholesome interest. Therefore, one should not neglect those outside studies which enlarge our sympathies and broaden our view of life and help us to get the best there is out of it.

Seek the acquaintance and companionship for your spare hours of the best men in the city or town in which you dwell. Contact with men of high purpose and character can easily become a means of education; it may serve to direct your taste, but that intimate development which is so much to be desired must be wrought out by each one for himself, and by no means so well as by reading the works and the lives of great men who have gone before us.

Read the history of medicine and ponder over the lives of those exalted types of humanity which in all ages have been found in its ranks. Look to them for inspiration, let them be to you as great warriors, statesmen, artists are to those who follow their respective callings. You will learn much from them and realize that knowledge, even medical knowledge, is not of any age, or clime; the labours of some of them will cause you to be lost in admiration and respect. A respectful frame of mind to those who have gone before and to your seniors is a pleasing quality in any young practitioner. One, who by over-confidence in self thinks he knows all about any subject, may very easily become a very dangerous man.

So order your reading as to become useful as well as learned citizens. In no way can you be of more service to your fellow beings than in having a good knowledge of hygiene and the laws of sanitation. Should your lot be cast in a small community or in a new growing town, you can do much for the general good, in promoting regulations having in view the prevention of disease; to you in a great measure

Some of you will live long enough to see the great white plague under control, and its ravages growing less and less. Join the movement and do your share.

Be loyal and true to the noble profession which you have entered, and by unimpeachable character and conduct build up and strengthen its prestige and reputation. Remember that the good you do is shared in by all of us, do not forget that, should you depart from professional rectitude, your brethren all suffer.

Remember that you have here to-day taken an oath. Study it well; it will be a source of strength to you, and an arm to ward off danger. In the battle of life, if anything I may happen to have said to-day should help you to fight manfully, and to win your way to honour and success, I shall be glad. A few words from our old medical friend, Oliver Wendell Holmes: "I have great confidence in young men, who believe in themselves. When a resolute young fellow steps up to the great bully, the World, and takes him boldly by the beard, he is often surprised to find it come off in his hand, and that it was only tied on to scare away timid adventurers." And so, with these few words of encouragement I bid you all God-speed.

will be the task of forming public opinion and preparing it to accept the various projects, which it may be necessary to carry out for the public health.

Especially should you give your support to the great movement which is going on to-day in all civilized countries against that great foe of humanity, tuberculosis. In the cities support the leagues that are there already formed. Wherever you may be, by word of mouth, and by your pen, lose no occasion to impress on the mind of the masses the nature of the danger they are in and that it can be warded off.

A CASE OF PARINAUD'S CONJUNCTIVITIS.

BY

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AND

JOHN McCRAE, M.D.,

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Parinaud's conjunctivitis, or lymphoma of the conjunctiva as the German authorities call it, is a disease of which hardly any mention is made in the textbooks. It is characterised by the appearance of granulations and large follicular masses on the palpebral conjunctiva, which rapidly increase in size, and also by the enlargement of the pre-auricular,

infra-maxillary and cervical gland. The enlargement occurs at the onset of the disease, or not long after. These glands may suppurate or may resolve. There is also a coincident rise in temperature each evening, which in our case, on one occasion, reached 103, but for the most of the time hovered about 100.3, the morning temperature being one to one and a half degrees lower.

As a rule, only one eye is affected. The course of the disease is not rapid, and it tends gradually to complete resolution.

This disease has to be diagnosed from trachoma, and from tuberculosis of the conjunctiva. From the former it is distinguished by the tendency to complete recovery, by the glandular enlargement and elevated temperature, and by the huge size of the granulations; from the latter, by its complete curability, the entire absence of any ulceration, as well as the lack of bacteriological proof.

Goldzieher states that the swellings in the cheek and neck are not purely glandular enlargements, but new growths of lymphoid tissue.

Dr. McCrae's accompanying pathological report is hence of much interest, the pathology of the disease being so obscure, our only regret being the lack of an intraocular inoculation in an animal.

The patient first came under my notice on the 11th of November, 1903, at which time he had been suffering from an inflammation of the right eye accompanied with slight ptosis for ten days. For this he had been employing a collyrium of boracic acid and cold compresses, but the symptoms becoming more severe he consulted me. The condition, which I found was as follows; marked swelling of both lids of the right eye with ptosis, lachrymation and photophobia; on everting the lids the palpebral conjunctiva appeared much thickened and red; dotted over it, especially on the inner third, were many papillary granulations, which on the retro-tarsal fold were of large size; these closely resembled the granulations of acute trachoma; the ocular conjunctiva was also injected and irritable, but not chemotic; no false membrane was present, and vision was unaffected.

The diagnosis of acute trachoma was made provisionally, and a culture was made from the conjunctival secretion, which secretion was small in amount, and mucopurulent in character.

For treatment I prescribed a collyrium of boracic acid and borax, an ointment of loretin, and the application of a 2 per cent. aqueous solution of nitrate of silver, once daily to the conjunctiva.

In forty-eight hours the granulations had greatly increased in size, and had pretty nearly covered the entire inner surface of the eyelids, the lids were much thickened and the ptosis very marked. Another culture was made from the conjunctival secretion, and the same germ

found as in the first culture. These cultures, showed bacilli of irregular form, which were very suggestive of the Klebs-Loeffler bacillus. A mouse was inoculated from the culture and died in two days. A false membrane was found which contained many bacilli, similar to those above mentioned. A shield was applied over the sound eye and a 15 per cent. solution of argyrol was swabbed on the conjunctiva four times daily. Dr. Buller saw the patient at this time with me and agreed as to the provisional diagnosis of acute trachoma.

Some small ulcerated patches appeared on the pharynx, but cultures, which were taken from them, proved negative, as did also a culture taken from the nose.

The ocular conjunctiva became greatly chemosed; and the pre-auricular and cervical glands began to enlarge; this was ten days after I first saw the patient. The temperature also began to rise each evening to 99.2, and finally reached 101, there being a morning remission. The complex of symptoms now caused a revision of the diagnosis, and trachoma was definitely excluded, the symptoms being clearly those of Parinaud's conjunctivitis.

Considering the symptoms, the bacteriological findings, and the apparent failure of local treatment to stay the course of the disease, I decided to try the injection of Rioux' anti-diphtheritic serum. Twenty-five hundred units were administered, followed at twenty-four hour intervals by a second and a third. The main result noted was that the granulations became more succulent and soft, but the glands continued to enlarge, and deep fluctuation was made out. Dr. Armstrong being called in, advised excision which was accordingly done by him. In the pre-auricular sub-maxillary, and cervical glands he found necrotic tissue, with a very small amount of pus. Dr. McCrae's report gives the pathological condition. A most remarkable amelioration of the ocular symptoms rapidly followed the operation. Within twelve days only a few of the larger cockscomb-granulations on the retrotarsal fold persisted, and these did not finally disappear until two months later.

Of much importance is the pathological report by Dr. McCrae, which I append. It is noteworthy, that, although cultures were taken from the nose and throat, no trace was found of a germ resembling that observed in the eye.

The bacteriological reports upon this case are as follows: November 12th,—Conjunctiva of the right eye; cultures, pure, of a weak growth of bacillus, slender, mostly 3 μ by .75 μ in size; Gram's method, positive, showing club-shaped and dotted forms, as well as straight and slightly curved bacilli. This was thought to be Klebs-Loeffler bacillus.

November 13th,—Pure culture, similar to the above was again ob-

tained. Its cultural characteristics were tested with the following result: gelatin, good growth, no liquefaction: broth, turbidity, no pellicle; in litmus milk slight acid reaction was observed; in sugar bouillons, no gas production occurred; growth on potato was very slight, the streak being rather faint, greyish-white, moist. The granules could not be stained, though tried repeatedly by Nissl's method, this being the only observable difference between the organisms and true Klebs-Loeffler bacilli; it was observed, also, that some of the individual bacilli were very large, and club-shaped forms were very readily demonstrable, even more so than the generally seen clubs of the diphtheria bacillus.

Inoculations into the subcutaneous tissue of the back of a brown mouse resulted in the death of the animal in 36 hours. The skin wound was closed by caked serum, no membrane being apparent to the eye. On the subcutaneous layer of muscle, however, a membrane was apparent, and on section, this was seen to contain great numbers of the bacilli described above, which lay upon the surface and in the membrane, but were not found in the deeper tissues. The organism could not be obtained by smear or culture from any other part or organ of the body.

A guinea pig, inoculated in the skin of the back, was dull and did not feed for 24 hours, but showed no membrane at the site of inoculation; the wound healed properly, and after 48 hours the animal was perfectly well.

November 17th.—Right eye; pure culture as before. Throat; cultures showed many streptococci, some staphylococci, no forms resembling the Klebs-Loeffler bacilli. Nose; culture from the right side of the nose showed staphylococcus aureus, no bacilli resembling diphtheria.

November 25th.—Conjunctiva of the right eye; smears negative. Culture gave pure growth of the same bacillus as before. Left eye; smears showed no organisms, cultures gave staphylococcus in pure culture, no bacilli.

December 2nd.—Conjunctiva of right eye; pure culture of same organism as before, only growing feebly and scantily.

December 7th.—Cultures from right parotid gland; Loeffler's blood serum. No. 1 gave no growth of any kind. No. 2, bacilli, 4-5 μ by 1 μ , not at all resembling the organisms in question, staining well, Gram's method positive. No. 3, scanty growth similar to No. 2.

December 7th.—Gland tissues from parotid region; mass of tissue, measuring roughly 4 x 3 x 2 cm.; on section, seen to be partly composed of parotid gland, partly lymphoid tissue, dotted throughout by yellow, purulent areas, (abscesses); smears from these areas show pus cells, but no organisms, and sections stained by Gram's method, show a few

scattered straight bacilli, in different parts, which do not at all resemble Klebs-Loeffler bacilli, and are in very small numbers; they cannot be made out definitely in the edges of the abscesses.

December 7th.—Conunctiva of right eye; pure culture, of feeble growth on blood serum, of same organism as before; the individuals are now mostly smaller in size, and in addition to the straight, curved, and dotted forms, are now to be seen a few diplo-bacillar forms, of which the outer ends are slightly narrower than the bases.

December 8th.—Conjunctiva of right eye; smears negative. Guinea pig inoculated with culture from blood serum was evidently ill for some hours, but after 42 hours was observed to be in normal health; slight scabbing, without membrane at wound. Smears made upon the unbroken conjunctiva of rabbits were without effect upon the animal, and the cultures from the conjunctiva 24 hours later, failed to show any organisms.

Summary: pure cultures of bacillus resembling Klebs-Loeffler bacillus found during 25 days of active treatment of the eye, this bacillus was not found in the other eye, in the nose or throat; when the glands suppurated, it was not found in the gland-tissues, nor in the pus, though, the organism causing the suppuration was not determined.

In view of the cultural characteristics and morphology, with the single exception of the granules being not determined, this is evidently the Klebs-Loeffler bacillus, and yet when one considers that it is fatal to guinea pigs, it cannot be the generally recognized type of that organism. It fulfils the conditions, which determine the recognition of that form of so-called pseudo-diphtheria bacillus, generally known as bacillus xerosis, but this bacillus is recognized as innocuous in the eye, where it is frequently found. The bacillus, whatever its exact nature, was probably excitant in the inflammation of the eye, because it persisted in pure cultures through 25 days, despite active local antiseptics.

Without entering upon the vexed question of the relationship or identity of *B. xerosis* and *B. diphtheriæ*, we may state, that we are dealing with either a virulent form of *B. xerosis* or a less toxic than ordinary bacillus diphtheriæ. In either event the presence, persistence, and evidently causal relationship of the clinical condition is an interesting fact.

CLINICAL REPORTS FROM THE WARDS OF THE ROYAL VICTORIA HOSPITAL.

BY

J. M. McCULLOCH, M.D., Montreal, Resident Physician.

CASE I. Acute Lymphatic Leukæmia—Illness of only three months duration—Leucocytes, less than 15,000 until last ten days before death—Early retinal changes—Absence of hydrochloric acid in gastric contents.

Abstract.—The patient, W. P., aged 30, was sent to the Royal Victoria Hospital by Dr. Geo. D. Robins of Windsor Mills, P.Q., complaining of weakness, dyspnoea, gastric disturbances and nervousness. There was nothing important in his personal or family history.

His present illness, the only serious one he ever had, began early in January with sensitiveness to cold, persistent drowsiness, weakness, shortness of breath and gastric disturbances. The gastric complaints consisted chiefly of flatulence and acid cructations, with slight tenderness on pressure. The weakness became a prominent symptom only one month later, though he was able to carry on light work until within six weeks of the time of his death. The symptoms were at first so prominent that primary gastric disease was suspected, though, later on, the increasing weakness and progressive pallor suggested to his physician a diagnosis of leukæmia which was confirmed by his examination of a fresh blood specimen.

On his entrance into the Hospital the only signs indicative of disease were a very marked pallor, considerable weakness, a markedly enlarged spleen and the distinctly palpable *epitrochlear* glands; the other glands were not enlarged on admission. In addition to this there was some dilatation of the heart.

The examination of the blood revealed a leucocytosis of twelve to fifteen thousand according to an average of numerous counts. The red blood cells numbered 1,400,000 and the hæmoglobin was 28 per cent. On account of the low white blood count the diagnosis of leukæmia was for a time doubtful.

The stomach was thoroughly examined and it was found that there was some slight motor insufficiency and an absence of hydrochloric acid. There was no evidence of lactic acid and the total acidity was 11 per cent.

A day or two later, when the blood count still remained the same, examination of stained specimens showed leucocytosis to be almost entirely mononuclear in character, so much so that the diagnosis of leukæmia was emphasized. There was no rise in the blood count until five days previous to his death. Examination then revealed the red blood cells to be 1,710,000, white blood cells 37,600 and the hæmoglobin 19 per cent.

A differential count at this time showed the polymorphonuclear cells to be only 15 per cent., large mononuclears 17 per cent., small mononuclears 67 per cent., eosinophiles and myelocytes .2. Among the 2,500 white cells counted, there were only 16 nucleated red blood cells, chiefly normoblasts, and some distinct megaloblasts were also present.

Examination of the eye grounds had been made on repeated occasions and neuroretinitis, such as is characteristic of grave anæmia conditions, was found.

Enlargement of the other glands, though slight, was distinct during the next three days, the patient becoming the while very much weaker and showing evidence of heart failure. There was gallop rhythm, progressive weakness, a terminal infection of the submaxillary glands and death on April 22nd, a little more than three months after the early symptoms.

The disease throughout was accompanied by a markedly intermittent temperature, the oscillations varying from the subnormal to 103.8°.

Post-mortem examination was not obtained.

CASE II. Primary sarcoma of the stomach with secondary plaque-like metastases throughout the intestines—Stenosis of ileum without symptoms—Extensive secondary disease of the kidneys with no clinical symptoms—Extensive secondary disease of the pancreas with no evidence in the urine or fæces—Persistent absence of both hydrochloric and lactic acids.

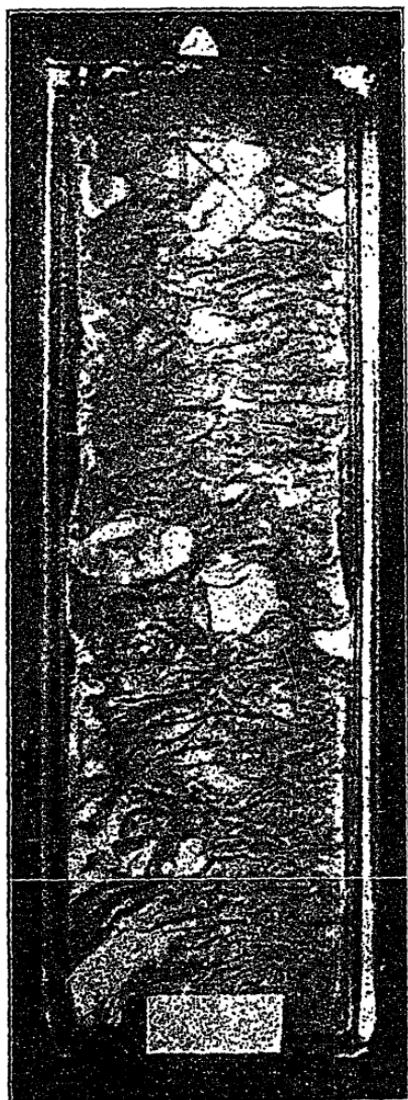
J. C., laborer, aged 53, entered the Royal Victoria Hospital under Dr. Martin's care on November 4th, 1903, complaining of pain in the stomach, weakness and loss of flesh for the past 14 months. He had had malaria 21 years previously and had suffered from eczema for the past 17 years. There was a marked alcoholic history but no definite evidence of specific disease. The family history was unimportant.

His present illness, which began 14 months previous to admission, was evidenced by pain after eating, for several hours, frequent vomiting of coffee-ground material and the presence of melæna. There was progressive loss of flesh and weakness, compelling him at the end of nine months to give up work entirely. His appetite, however, had remained very good up to a short time previous to his admission. Severe pain had been present for only about four months and was at times extreme.

The patient, on admission, was much emaciated and very anæmic. The finger nails were clubbed. There was no glandular enlargement. In the lungs there was emphysema and the heart showed some slight enlargement with an apical transmitted systolic murmur. The blood count showed 4,000,000 red cells and 6,400 white.

The digestive system: The patient had a good appetite until two

weeks previous to admission. His food, however, induced pain and he had frequent attacks of vomiting. Jaundice was not at any time present. Examination of the abdomen showed a marked enlargement of the liver, which could be felt extending as a ledge moving with each respiration, and extending to 8 cm. below the costal margin in



Sarcomatous Plaques in Small Intestines.

the right nipple line, and 17 cm. below, in the right sternal line; it was firm and smooth, the border being distinct, perhaps somewhat sharp; there was tenderness over the whole surface. The relative liver dulness began at the right nipple. Examination of the stomach revealed no marked dilatation, and repeated examination was made of the contents

after preliminary lavage. The results of a test meal showed no retention, no free hydrochloric, no lactic acid and the total acidity varied from 10-35 per cent. The urine contained at times, a slight trace of albumin and a few hyaline casts but nothing else of importance.

The nervous system was normal.

Progressive weakness, emaciation and suffering ensued up to the time of the patient's death, on Jan. 25th, 1904. There was marantic oedema, some hydrothorax and ascites, but very little evidence of great increase in the size of the tumor mass up to the time of death.

The clinical diagnosis of carcinoma of the stomach with secondary involvement of the liver was made, though with some reservation, inasmuch as the symptoms never quite coincided with the typical features of that disease. There was no dilatation of the stomach evident, no retention of food, and at no time was lactic acid found in the contents after a test meal.

The autopsy, performed by Dr. McCrae, revealed an extensive, plaque-like sarcoma of the stomach, submucous in character and with multiple small ulcers. Similar multiple submucous sarcomata were found in the small intestines (vide Photograph) with *stenosis of the ileum*, through which a goose quill alone could have been admitted. *At no time, however, did this give any symptoms.*

The *pancreas was extensively diseased* with breaking down and necrotic abscess formation, and yet, *at no time was sugar in the urine*, although repeatedly looked for.

Both *kidneys were extensively diseased* throughout with secondary growths, and yet *at no time was there more than a trace of albumin* and a few hyaline casts found.

Microscopical examination showed the neoplasm to be of the small round celled type of sarcoma, and streptococci were found in abundance, evidently as a terminal infection.

REMARKS: Cases of sarcoma are now common enough; Howard in 1902 collected a series of 61 undoubted cases and Dr. McCrae adds yet another to the series. *Involvement of the intestinal tract appears to be recorded, however, in only one case* of lympho-sarcoma of this nature. Dock in 1900, however, recorded a remarkable case of removal of one-third of the stomach as well as part of the duodenum for a similar condition.

So far as the differential diagnosis of sarcoma of the stomach is concerned, the consensus of opinion would indicate that there is no reliable means of distinguishing between sarcoma and carcinoma when affecting the stomach, unless it should chance that portions of the affected tissues are found in the contents and subjected to microscopical examination.

T H E

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A Monthly Record of the Progress of Medical and Surgical Science.

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PROFESSOR POZZI'S VISIT.

The visit of Prof. Pozzi to Montreal is deserving of more extended notice than was possible to give in connexion with the Congress of French-speaking Physicians, which was held late in June. The importance of the man in the scientific and political world, the official character of his visit, representing, as he did, the Academy of Medicine and the French Republic, lend significance to the Congress itself.

The first meeting of this Congress was held two years ago in Quebec; the second was held in Montreal, and arrangements are already in progress for the third meeting, which will be held two years hence. Our French-Canadian confreres are no longer content to follow old methods; they are realizing more fully the importance of keeping in touch with the great scientific movement, and of gathering information abroad as well as at home.

Nothing is more natural than that they should turn to France, the country to which they are bound by the strong ties of sentiment. It

is not necessary to seek for an explanation of this natural tendency in the imperfection of the English nature, nor to rail at ourselves, because we are not sympathetic to things which we do not understand, because we are self-complacent and indifferent to much that lies without our own circle. We lament the possession of these qualities, and are trying to eradicate them, so that in time our brethren may forgive and love us.

In the meantime, the French-Canadian physicians are going to France, and the French Republic and the French Academy sent Prof. Pozzi to bid them a fuller welcome to the large opportunity which lies in Paris. We must confess that we do not share the apprehensions of Archbishop Bruchesi, as to the dangers which are in store for his "chers enfants," in that great city. It was but natural His Grace should give expression to those fears, at the reception which was held in the halls of his own University. The invitation to come under the influence of Paris was conveyed by Prof. Pozzi, who is not a Catholic in religion, and is distinctly *rouge* in his politics, as we say in Quebec. So far as it appears in his writings, Prof. Pozzi makes a distinction between organized religion and science, as being better for science and for religion also. At the reception before-mentioned, the newly elected Bishop of Joliet gave the assurance that the Church had at no time been hostile to the spirit of science, and we believe that the fears of the Archbishop are groundless. Even if the young charges of the Archbishop should become imbued with the spirit of Prof. Pozzi, no great harm would be done to religion or to themselves.

The personality of Prof. Pozzi is a striking one, and interest was at once aroused by his keen, clear-cut, intellectual face; his enthusiasm and energy were expressed in every line and movement of his figure, in every look and gesture. When he spoke, the charm was increased by the wonderful finish of phrase, sentence and theme.

During his brief visit, Dr. Pozzi operated at both the Notre Dame and Royal Victoria Hospitals; on each occasion he did an abdominal hysterectomy for fibroid tumour of the uterus. It is not, however, on his surgical work, done under strange environments, especially trying to such an intensely nervous nature, that we should base our judgment of the man, though rapidity and skill were not lacking. Rather were we attracted by the "teacher," so lightly, yet clearly did he bring out the salient points of his procedure; the enucleation of the fibroid preparatory to the removal of the uterus; the quick demonstration of the operative field, showing the accurate coaptation of the peritoneum; the insertion of the two silver wire sutures as a support against abdominal straining.

Again, at the meeting of the gynæcological section, it was a treat to

listen to his paper. The subject chosen was Sterility, due to arrest of development, characterized as a rule by dysmenorrhœa, anteflexion and the conical cervix and stenosed os. Dr. Pozzi condemned dilatation as unsatisfactory and futile; mere incision of the lips gave rise to cicatricial tissue and frequently an ensuing endocervicitis, which defeated the object of the operation. His own plan was to incise the lips, cut out wedge-shaped masses and then bring the edges together in such a way as to cover the raw surfaces. The immediate result was a cervix which at first appeared widely gaping, but soon contracted to normal proportions; the ultimate results in regard to fecundity had been most gratifying.

THE REGISTRATION OF BIRTHS.

The Medical Officer of Health for Montreal, has issued to the profession a copy of By-Law No. 315, which was adopted on the 20th of April, 1904. Section I. is as follows:—It shall be the duty of every qualified medical practitioner or midwife, attending at, or, in their absence, the parent or parents or any other person present at the birth of any child born within the limits of the City of Montreal, to sign, and give a written report, within eight days after such birth, to the Medical Health Officer of the City of Montreal, stating, as far as possible, the particulars required in the following form." Section III. specifies the penalties attached to a violation or contravention of the by-law, which may amount to a fine of forty dollars or imprisonment for a period of two months.

There is no question as to the advisability of providing some accurate system for the registration of births; but we would like some assurance that the Health Committee had taken into account all the difficulties associated with so radical a measure. They may not be aware that a similar measure was enacted in St. John, and that the prosecutions were withdrawn, on the ground that the law was *ultra vires* of municipal authority.

Under sub-section 51 of section 300 of the city charter, it is enacted, that the city council shall have authority "to compel the reporting and recording of all births and deaths within the city." Nothing is said as to the body upon which this burden shall fall, and a by-law, even if within the definite powers of municipal incorporations, may be set aside, if it can be shown to be unreasonable, oppressive or manifestly unfair.

We do not say this by-law is unreasonable, oppressive or unfair, but there will surely be some who will consider it so. The matter is sure to come to the test, unless the Health Committee is content to allow

this enactment to fall into desuetude, along with many other of its ordinances, good and bad.

On a previous occasion we gave assurances, that there would be no factious opposition on the part of the profession to a well considered measure for the registration of births. In common with all good citizens we desire to make government easy and not difficult. We even went so far as to tender to the Health Committee such wisdom as is possessed by the various medical societies. To pay a fine of forty dollars, or even to endure a two months' term of imprisonment would be a serious inconvenience to most medical men. If such a contingency should occur, the Health Committee must not be surprised, if they discover a lack of academical calmness in the discussion.

CANCER STATISTICS IN MONTREAL.

The Committee of the Cancer Research Fund of Great Britain, during its first year of existence, has devoted itself to the object of attaining, first of all, a careful series of statistics as to race, age, sex, etc., of a large number, at least ten thousand, cases of cancer, in which a microscopical examination is recorded. In pursuance of this object the pathological records of the Montreal General and the Royal Victoria Hospitals have been used; and the series based upon autopsy findings has been made. There is now available, at the two hospitals, a record of autopsies numbering 3,275. Of this number, malignant new growth was found in 275 cases, a ratio of incidence of one in every 11.9 autopsies. If we compare this with the figures at hand from Guy's Hospital, London, we find there an incidence of one case in every eight autopsies; at Hamburg for a period of years, the ratio is one in 12.

Of the 275 Montreal cases, 56 per cent. are in males; this preponderance of new growth in males is necessarily off-set by some circumstances, chief of which is the fact that carcinoma of the female breast, while very frequent, is accessible and, therefore, operable. Of these 275 cases, 212 were of carcinoma and 63 of sarcoma. Since the Research Fund Committee has judged it necessary to rely only upon those cases in which a microscopical examination is recorded, the 275 cases are reduced to 171, although in the remaining 104 there is little or no doubt of the accuracy of the diagnosis.

In the carcinoma cases, the frequency of occurrence in the alimentary canal is striking; 60 per cent. of all these cases are in that situation, contrasted with 35 per cent. in the London series, but agreeing closely with the figure of 57 per cent. yielded by the Hamburg reports. Of all the cancers occurring below the age of 35, 63 per cent. were in the alimentary tract; of all the cancers of the alimentary tract, 62 per cent.

occurred in the stomach; of stomach cancers the earliest occurrence was between the 21st and 25th years, and the latest between the 81st and 85th years; 42 per cent. of them occurred between the 46th and 60th years: each hemi-decade between 46 and 65 showed about the same frequency; 1.9 per cent. of the carcinoma cases occurred before the 25th year, 6 per cent. between the 25th and 35th, and 6 per cent. between the 35th and 40th. Of carcinoma in the male, 40 per cent. were situated in the stomach; in the female 32 per cent. were in the stomach, 16 per cent. in the breast, 13 per cent. in the uterus. Of the sarcomata, 6 per cent. occurred in the first decade of life, a figure which is low because neither of the hospitals has a large number of child patients; only 11 per cent. occurred before the age of 25, and 30 per cent. of the sarcomata occurred between the 46th and 60th years.

PATENT MEDICINES.

From time to time the profession has been enlightened upon the subject of the impurity and adulteration of the drugs, which we habitually employ. The Inland Revenue Department, in its regular bulletins has shown, to take a few instances, that out of 15 samples of tincture of opium collected at random, only four were genuine; half the samples of citrate of iron and quinine were adulterated. Of 23 samples of tincture of gentian, nine were adulterated; of 11 samples of tincture of cardamoms five were adulterated; of camphor two out of six; of myrrh five out of 17; of rhubarb 14 out of 21; of calumba one-third; of ginger four out of seven; of squills four out of six; of jalap one-fourth the samples; of buchu every one. Carrying the research further, into spirits of nitrous ether, and dilute hydrocyanic acid, the official analyst found the same results. Only one sample of nitrous ether out of nine was found correct; some had no nitrous ether and several others were practically useless.

Mr. McGill, the chief chemist, next turned his attention to the amount of alcohol, which is contained in the various patent medicines so shamelessly advertised, and he found that a percentage of thirty, forty, and even fifty was not uncommon. Of 91 separate tonics and bitters recently analysed by the Massachusetts State Board of Health, seven contained below 10 per cent. of alcohol, 54 contained an average of 22.5 per cent., and 27 contained over 30 per cent. The editor of a well known journal, published in the United States, has had an independent investigation made of the more common nostrums, and he declares, to take a few samples, that Lydia Pinkham's Vegetable Compound contains 20.6 per cent. of alcohol, Paine's Celery Compound

21, Ayer's Sarsaparilla 26.2, Hood's Sarsaparilla 18.8, Vinol 28.5, Hostetter's Stomach Bitters 44.3, Warner's Safe Tonic Bitters 35.7. It is only fair to add, that this editor has a good-sized law-suit upon his hands as a result of these disclosures, but there is a long distance between taking a law-suit and collecting damages.

At the last meeting of the Ontario Medical Council, the indulgence in patent medicines was one of the chief matters considered. The report of the special committee appointed to consider the best methods of dealing with injuries resulting from the employment of these preparations declared that, in view of the large and rapidly increasing sale, and the unwarranted statements contained in advertisements of them, the Dominion Government should be memorialized to pass a law making it compulsory to have displayed on every bottle a complete and correct formula of ingredients, and that it should be made a misdemeanor to mis-state in any advertisement that an article was a cure for any specific ailment.

This is a matter which does not concern the profession, save in so far as it has the public interest at heart. The dissemination of false statements increases the demand for true information, and the employment of these poisons opens a large field for scientific treatment. But the more foolish amongst the public should be protected against their own folly, and against the heartlessness of the nostrum vendors, who are willing to profit by their credulity.

MONTREAL MEDICO-CHIRURGICAL SOCIETY.

There were eighteen regular meetings of this Society during the past session, at which fourteen papers were read, and twenty-one cases reported. Many living cases were brought before the notice of those present, and the members had the pleasure of attending three lantern demonstrations including one on Radium. The average attendance was fifty-four members, an average number far in excess of that for many years past, possibly the highest average attendance in the history of the Society. The programmes had, in most cases, been arranged months before the stated meeting, with the object of assuring the production of carefully prepared papers. Amongst other contributors were Drs. Osler; Goldthwaite, of Boston; Cushing, of Baltimore; and Primrose, of Toronto; also Prof. Rutherford, of the Faculty of Applied Science of McGill University.

Besides being a session of unusual activity for the Society at large, it has been one, in which the Council has been called upon to consider and adjudge many questions of great interest to the profession. Amongst

other subjects may be mentioned, the proposed change of tariff by the Canadian Nurses' Association, the medical inspection of schools, and the suggestion that the hospitals and dispensaries shall be asked to consider the regulation of their dispensation of charity amongst those able to pay for medical attendance. This question alone is one of sufficient importance to have demanded much time and thought from the members of the Council.

It is worthy of note that a bill has been introduced in the British Parliament, providing that for the purpose of the British medical act, any portion of the British possessions which is under both a federal and a local legislature may be declared to be a separate British possession. The passage of such a bill would permit the British medical authorities to enter upon negotiations with the council of any Province in Canada to arrange for reciprocal registration without waiting for Dominion registration.

CANADIAN MEDICAL ASSOCIATION.

The most recent information is that the meeting of the Canadian Medical Association, to be held in Vancouver, August 23rd, 24th, 25th and 26th, will excel in interest any of the thirty-six meetings which have preceded it. The general secretary has already the names of over two hundred members from the East who will attend, and the West promises as many more.

The members of the profession in British Columbia, have laid the matter to heart, and intend making this first meeting in their province one to be remembered. An excellent programme of papers, tempting transportation rates, liberal arrangements for side trips and detours, promise of a cordial welcome, all give assurance of success. The return railway rate from Montreal is sixty-eight dollars, the sleeping-car rate thirty-five dollars, and dining arrangements about twenty-five dollars for the complete journey. Railway certificates and all information may be obtained from the general secretary, 129 John Street, Toronto, or from the Montreal secretaries, who may be addressed in care of this JOURNAL.

The provisional list of papers is as follows:—

President's address—Simon J. Tunstall, Vancouver.

Address in Surgery—Mr. Mayo Robson, England.

Address in Medicine—

Address in Gynaecology—Dr. C. E. Dudley, Chicago.

Paper, title to be announced—Dr. A. McPhedran, Toronto.

Paper, title to be announced—Dr. J. H. Elliott, Gravenhurst,

Surgical Treatment of Trachoma—Dr. G. Stirling Ryerson, Toronto.

- Paper, title to be announced—Dr. A. Armstrong, Arnprior.
- Paper, title to be announced—Dr. A. E. Garrow, Montreal.
- The Operative Treatment of Spina Bifida—Dr. E. R. Secord, Brantford.
- The Business Aspect of the Medical Profession—Dr. James E. Hanna, Ottawa.
- Paper, title to be announced—Dr. D. J. Gibb Wishart, Toronto.
- Paper, title to be announced—Dr. J. W. Stirling, Montreal.
- Paper, title to be announced—Dr. B. E. McKenzie, Toronto.
- Hernia of Bladder Complicating Inguinal Hernia—Dr. Francis J. Shepherd, Montreal.
- Gastric Ulcer and its Treatment—Dr. J. B. McConnell, Montreal.
- La Syphilis Canadienne et Différents Facteurs et Gravité—Dr. D. E. LeCavelier, Montreal.
- Case Reports—Dr. Robert H. Craig, Montreal.
- Paper, title to be announced—Dr. James S. Edwards, Grand Rapids.
- Paper, title to be announced—Dr. Henry Howitt, Guelph.
- Chronic Cystitis—Dr. J. O. Camirand, Sherbrooke.
- Intelligence, with a Report of Three Cases—Dr. Maud E. Abbott, and Dr. F. A. L. Lockhart, Montreal.
- Actinomycosis—Dr. James Bell, Montreal.
- Paper, title to be announced—Dr. Ingersoll Olmsted, Hamilton.
- Prostatectomy Under Local Anæsthesia—Dr. H. H. Sinclair, Walkerton.
- High Frequency Currents in Functional Disease, more particularly Functional Neuroses—Dr. S. F. Wilson, Montreal.
- Therapeutic Hints from Bacteriology—Dr. G. R. Cruickshank, Windsor.
- Paper, title to be announced—Dr. C. H. Mayo, Rochester, Minn.
- In addition there will be a number of papers from Western men, whose names have not yet been received.

Reviews and Notices of Books.

TUBERCULOSIS AND ACUTE GENERAL MILIARY TUBERCULOSIS. By PROF. DR. G. CORNET, edited, with additions by Walter B. James, M.D. Authorized translation from the German, under the editorial supervision of Alfred Stengel, M.D. W. B. Saunders & Co., Philad., New York and London. J. A. Carveth & Co., Toronto.

The present volume fully maintains the high standard of its predecessors in Nothnagel's system; Professor Cornet handles his subject

with a master's hand, and in a volume of 800 pages leaves little unsaid on the subject of tuberculosis. Sixty pages are devoted to the bacillus, including an excellent chapter on its chemistry by E. R. Baldwin, of Saranac Lake. A short discussion of the relationship of human to bovine tuberculosis has been added by the editor, Koch's celebrated paper on this subject having appeared since the publication of the original work. Throughout this chapter, the author states clearly the views generally held on the infectivity of tuberculosis. Ordinary expired air is not a factor in conveying the disease, as it requires cough to dislodge the bacilli; infected food plays a relatively infrequent part, whilst dried sputum, especially indoors, forms the real danger.

The modes of invasion are treated at considerable length, and much space is devoted to the incidence and infection of the various organs and tissues.

The danger of infection in the open air is regarded as practically nil, even the street sweepers show a remarkable immunity, and the great majority of cases are due to infection in house or factory. A very interesting chart is introduced, showing the influence of age on the incidence of the disease. Taking the number of individuals living at any age, the frequency of the disease increases up to the age of 70; over this age it decreases, owing to the diminishing proportion of elderly people engaged in active work in factories or other places in which exposure is apt to take place.

The question of heredity is treated rather shortly. The author holds, that statistics are not yet available to settle this time-honoured doctrine, and he evidently leans strongly to family infection rather than heredity tendencies.

The remarks on climatic treatment, are judicious and complete. Although, applying chiefly to Germany, they have been supplemented by a list of American resorts.

The translator's work has been remarkably well done, and shows little trace of German idiom. The work must be regarded as a standard and authoritative expression of the present status of tuberculosis, and for reference will prove of the greatest interest and value to all who are interested in the subject. The clear type and excellent paper render the perusal of the work a pleasant task.

RAILWAY AND OTHER ACCIDENTS. With relation to injury and disease of the nervous system. A book for court use, by ALLAN MCLANE HAMILTON, M.D. New York, William Wood and Company; Toronto, Chandler and Massey.

This book deals with an occult subject, the relation of accidents to

injury and disease of the nervous system. It is hard enough to estimate that relation in plain uncomplicated cases; but when to the natural difficulties are added conscious or unconscious fraud, the desire for gain on the part of the patient, and the desire to avoid responsibility on the part of a corporation, with expert medical testimony and legal investigation, prevarication, evasion and subterfuge interjected into the discussion, it is easy to guess how fallacious is experience and how difficult judgment. For the past thirty years, Mr. Erichsen's work upon Spinal Concussion has been a *vade mecum* to the plaintiff's attorney. This work by Dr. Hamilton will, we imagine, be of equal usefulness to the corporation lawyer, and to the medical witness whose desire is to to expose fraud.

There is not much in the book about railway accidents; but there is a great deal about the nervous system, and much of that is already contained in the text-books.

MODERN OPHTHALMOLOGY. By JAMES MOORES BALL, M.D., Professor of Ophthalmology in the St. Louis College of Physicians and Surgeons. With 417 illustrations in the text and numerous figures on 21 coloured plates, nearly all original. 820 pages, extra large Royal Octavo. Price, extra cloth, \$7.00, net; half-morocco, \$8.50, net. F. A. Davis Company, publishers, 1914-16 Cherry Street, Philadelphia.

This is a complete treatise on Ophthalmology, appearing as a large and handsome volume of over 800 pages, copiously illustrated. The author has evidently aimed at producing a standard work in which all recent progress is recorded in this ever progressive special branch of Medicine and Surgery, and he is to be congratulated on the success of his undertaking. The work includes chapters on the development of the eye, its anatomy and physiology; also many new illustrations, with the descriptive text, and a long chapter of some seventy pages is devoted to examination of the eye. As a new feature this contains an illustrated description of McKenzie Davidson's method of localizing foreign bodies in the eye. Short chapters on preparation of the eye for operation and on the care of the eyes in early life, are excellent features of the book, and the final one, on pathological and microscopical examination of specimens, will be hailed with satisfaction by every ophthalmic surgeon who takes a scientific interest in advancing the knowledge of his subject. The main body of the work, dealing with diseases and injuries of the eye, is clearly and yet concisely presented, with sufficient fulness to satisfy all ordinary requirements, and in the matter of treatment the writer has shown himself to be particularly clear and explicit, a fact

which will be appreciated by all who have not had the benefit of many years' experience in special work.

In order that there may be no unnecessary repetition of things belonging in common with other departments of medicine, the writer has often given only the points properly belonging to the study of Ophthalmology, referring the reader to works on general medicine and surgery for details in matters of speculative value, as well as in all that concerns treatment. An instance of this practical method of shortening special articles without sacrificing completeness is to be noted in the article on Graves' disease, and there are many others, in which the author is merely indicating the road to be travelled rather than acting as constant companion.

There are, of course, some things omitted which other writers might deem worthy of mention, but it is only fair that an author be allowed some latitude in determining what may or may not, in his estimation, be essential.

A SYSTEM OF PRACTICAL SURGERY—By Prof. E. VON BERGMANN, M.D., Prof. P. Von Bruno, M.D., and Prof. von Mikulicz, M.D. Vol. III., Translated and Edited by William T. Bull, M.D., of New York. Lea Bros. & Co., New York and Philadelphia, 1904.

The third volume is of particular interest to general practitioners as well as surgeons, as it deals with the surgery of the extremities, including malformations, injuries, fractures and diseases. It represents the ideas and methods of the German school, with the additional views of the American school in bracketed notes. The chapters are very full and the work is well illustrated. Methods, concerning which there still exist widely different views, are discussed fairly and judiciously. It may be noted that the open treatment of fracture of the patella is represented as growing in favour during the last few years. There is, however, a very careful description of the essential differences found in a series of these fractures, particularly, as to the extent of injury to the so-called "reserve extensors," and it is made quite clear that the cases for open treatment must be carefully selected. The functional results obtained by splints, bandages and massage are in favourable cases so good, that one might hesitate to advise a method always attended by a certain amount of hazard.

The discussion of Lorenz's bloodless method of treating congenital dislocations of the hip, seems to be very fair, and it is advised in the case of young children. Mikulicz's hip splints are also commended. In the discussion of the various fractures, careful attention is given to the points in differential diagnosis. The chapters on malformation are

very rich in illustrations, drawn from the great variety of cases, seen to such advantage and in such numbers in the large German and Austrian clinics. The volume is fully up to the standard of its predecessors.

DISEASES OF THE INTESTINES AND PERITONEUM—By Prof. Dr. HERMANN NOTHNAGEL, Professor of Special Pathology and Therapy, University of Vienna; Edited with additions, by Humphrey D. Rolleston, M.D., F.R.C.P. Physician to St. George's Hospital, London. Authorized translation from the German, under the Editorial Supervision of Alfred Stengel, M.D., Professor of Clinical Medicine in the University of Pennsylvania, Philadelphia, New York, London. W. B. Saunders & Co., 1904; Toronto, J. A. Carveth & Co.

The series of monographs issued under the editorship of Prof. Nothnagel have been of a very high order. Their influence must be very greatly extended by Prof. Stengel, who has supervised the translation of the second edition, which appeared in 1903. Most readers, will probably be ready to admit too, that the additions and interpolations by Dr. Rolleston bring the work to a yet higher degree of excellence.

The opening chapter deals with that complex subject, the chemical processes that occur in the intestine, taking up seriatim the pancreatic juice, the bile, the intestinal juice and the excreta. The composition of the pancreatic juice and action of the various enzymes and ferments contained in it are stated. Many observers are working on the problems associated with the pancreatic fluid and bile, and there is gradually appearing a more definite knowledge and a greater unanimity of opinion concerning their value as excretions and as secretions. While experiments *in vitro* show that the bile exercises no chemical effect on proteids or fats it is quite clear that the fats are emulsified by the actions of the bile and pancreatic secretions, so as to form a very minute and stable emulsion. As a result of his researches Röhmann believes that the bile increases peristalsis.

The articles dealing with peritonitis and ileitis are of unusual interest. A distinction is made between "antiperistalsis" and "recoil contraction" (Rückstosscontraction). The symptoms of ileitis are contrasted with those of peritonitis. Each symptom is fully discussed. In fact this subject of such great interest to the clinician is more fully treated than usual, but not more fully than its importance justifies.

Peritonitis is given an important position, and the various causes full consideration. After discussing the possibility of a primary idiopathic inflammation, the author concludes that it cannot be positively

proved to exist. The chapter on appendicitis is one of great interest. The various factors, anatomy, histology, position, blood supply and bacterial invasion, receive due attention.

It is pointed out that narrowing and obliteration of the lumen of the appendix are not necessarily pathologic. The appendix, being a rudimentary organ, tends to undergo certain involution processes, which may end in obliteration of the canal.

That the appendix contains lymphoid tissue is well known, but that the appendix contains as much lymphoid tissue as the tonsils is possibly an exaggerated statement. The tonsils are easily infected from the various buccal bacterial flora, and so is the appendix from similar flora in the cæcum. It is significant that the majority of the cases of appendicitis occur "within the first half of life"—before the thirtieth year; this observation is interesting because Ribbert has shown that, from this time on, the follicles of the appendix begin to atrophy.

The section on the treatment of appendicitis is, for the most part, in accord with generally received views. Many practitioners, however, who have had large experience in appendicitis, will challenge the use of opium in the early stages of acute cases. The pain is nearly always controlled by heat or cold applied locally, and if the diet is properly regulated and purgatives avoided, there will be very little active peristalsis. Altogether the work is of the highest character, and written in a lucid and interesting style.

CLINICAL TREATISES ON THE PATHOLOGY AND THERAPY OF DISORDERS OF METABOLISM AND NUTRITION. By PROF. CARL VON NOORDEN, Frankfort, A.M. American edition by Boardman Reed, M.D. Part V. Concerning the effects of saline waters on Metabolism. 1904. E. B. Treat & Company, New York.

The present volume is part V. of this interesting series of monographs. The previous volumes dealt with Obesity, Nephritis, Colitis and the Acid Intoxications, and each is sold at the small price of fifty cents.

This publication is the second edition of a thesis published from Von Noorden's clinic by Dr. Carl Dapper, with amplifications based upon subsequent investigations at Kissengen and Frankfort, by these two eminent physicians. The results recorded are in some respects different from those previously obtained by experimenters upon animals, and healthy individuals, and are contradictory of the notions previously entertained as to the action of saline and alkaline waters. These investigations are of great importance, dealing, as they do, with the effect of saline waters on digestion, and the arrangement of diet during the

process of taking the waters. The whole subject of balneology is placed on a much more rational basis.

INTERNATIONAL CLINICS; a quarterly of illustrated clinical lectures and original articles; edited by A. O. J. KELLY, A.M., M.D. Vol. II., 14th Series: Philadelphia, J. B. Lippincott Company; Montreal, Charles Roberts, 1524 Ontario St. Price, \$2.00.

The volume of *International Clinics* for July is issued. The articles are timely and practical, and are well illustrated by two coloured plates, the one of *Trypanosoma*, the other of intestinal lesions in *Uncinariasis*. There are in addition thirty plates in black and white and many figured drawings. The volume deals with Diseases of Warm Climates, Treatment of disease, Medicine, Surgery, Pediatrics and Rhinology. We note with pleasure Dr. McCrae's review of recent progress in Tropical medicine. The section upon Treatment deals chiefly with diseases of the heart and blood vessels. Arterio-sclerosis is done by Dr. Nichols; the gastro-intestinal form of this disorder is done by Dr. Biering; digitatis in heart disease, by Dr. French, and impaired compensation, by Dr. Long. The other departments are generally varied, and the whole volume is deserving of nothing but praise.

MANUAL OF MEDICINE. By THOMAS KIRKPATRICK MONRO, M.A., M.D., Glasgow. Baillière, Tindall and Cox, London; Chandler and Massey, Toronto. 1903.

This volume of 900 pages is intended for students, and the belief is expressed in the preface that it will also be of service to junior practitioners. That is our belief too. The teaching is sound, the arrangement good, and the volume is pleasant to the eye and the hand.

EPILEPSY AND ITS TREATMENT. By WILLIAM P. SPRATLING, M.D. W. B. Saunders & Co., Philadelphia, 1904. Toronto: J. A. Carveth and Co. Price \$4.00 net.

Within the compass of a little over five hundred pages, Dr. Spratling has included practically all that is known about epilepsy, a disease upon which, up to the present, no complete treatise has appeared in America since that of Echeverria was published thirty-three years ago. The volume, a truly valuable one to both student and practitioner, represents the practical experience of Dr. Spratling as Superintendent of the Craig Colony for Epileptics, at Sonyea, N.Y., during a period of ten years. The labour bestowed upon the work must have been enormous, and no praise is too great for the able way in which the author has accomplished his onerous task. The chapters on causation, the various forms of aura, and treatment are especially interesting, while those devoted to

the psychologic and medico-legal aspects of "the sacred disease" will amply repay perusal by all interested in the study of mental disorders. The illustrations are numerous and good, and the work throughout is, as stated in the preface, "a credit from the standpoint of the book-maker's art."

T. J. W. B.

Medical News.

MARITIME MEDICAL ASSOCIATION.

The fourteenth annual meeting of the Maritime Medical Association was held in Halifax, commencing July 6th.

Dr. G. M. Campbell, the president, delivered the annual address. He dealt with the history of vital statistics in the Maritime Provinces. In regard to reciprocal registration, he said that there existed a strong spirit of concession which might lead to an arrangement between the provinces.

Dr. Arthur Birt read a paper upon some affections of the feet, and Dr. A. B. Atherton described an operation upon a patient with gallstone in the common duct. Dr. G. C. Vanwart reported a case of suppurative perihepatitis with recovery after operation. The significance of casts in the urine was considered by Dr. L. M. Murray, of Halifax.

Upon the afternoon of the first day, Dr. Chisholm, president of the Nova Scotia Medical Society, delivered an address. There was a presentation of clinical cases, and Dr. Ernest W. Cushing, of Baltimore, reported upon tuberculous kidney and ureter. Dr. Simon, of Baltimore, who was to have read a paper was not present. Dr. Campbell, of Halifax, completed the session with a case report.

In the evening there was a general discussion upon Inflammation of the serous membranes, and the following papers were read:—Uterine Hæmorrhages and their causes, by Thomas Cullen, M.B., Baltimore; Some Recent Developments in European Gynæcology, by Walter Chipman, M.D., Montreal; The use of the X-Ray in the Surgery of the Diseases of Bones, by F. A. Codman, M.D., Boston; Notes on some cases treated with X-Rays, by H. D. Weaver, M.D., Halifax; Legislation for the prevention of Blindness, by E. A. Kirkpatrick, M.D., Halifax.

At the morning session of the last day, after the election of officers, Dr. W. F. Hamilton, of Montreal, read an address in Medicine. There was a discussion upon compound fractures, and two papers were read, one upon Goldthwaite's operation on the Patella, by Dr. MacKeen, the other upon stricture of the œsophagus, by Dr. John Stewart, Halifax. The meeting concluded with case reports by Dr. T. C. Watson and Dr. W.

E. Moore, and three papers:—the Dissemination of Disease by railroad trains and other public conveyances, by J. F. MacDonald, M.D., Hope-well; the Public Health Act in Nova Scotia, by A. P. Reid, M.D., Halifax; and Medical Protection, by Henry P. Clay, M.D., Pugwash.

The following officers were elected: President, S. R. Jenkins, Charlottetown; vice-president for New Brunswick; G. C. Vanwart, Fredericton; vice-president for Nova Scotia, G. E. Dewitt, Wolfville; vice-president for Prince Edward Island, F. F. Kelley; secretary, T. D. Walker, St. John; treasurer, Huntley McDonald, Antigonish; secretary of local committee of arrangements at Charlottetown, H. D. Johnson. It was decided to invite the Canadian Medical Association to meet in Halifax in 1906.

COLLEGE OF PHYSICIANS AND SURGEONS.

The College of Physicians and Surgeons of the Province of Quebec completed the semi-annual meeting on the 6th of July.

The treasurer's report showed that the total receipts amounted to \$8,799.69, while the expenses were \$4,289.63, leaving a balance of \$4,510.06 on hand.

Following are the names of graduates, fifty in number, admitted to the practice of medicine:—George E. Beuregard, John George Browne, Raoul Philippe Bonin, Arthur Bergeron, Isaac E. Crack, Thomas Fred. Connelly, Omer Etienne Desjardins, Edgar David, James Robert Goodall, Richard H. M. Hardisty, John Johnston, Watts Grey, Havelock Lippiatt, Philippe Quesnel, George Marcotte, Louis Pierre Marceau, Narcisse Henri Fouchette, Thomas Lankin Wilson, John A. Nutter, Jos. A. B. Godbout, Jos. Elie Belanger, Jos. Alf. Drouin, P. A. Gastonguay, Emile Fortier, Adrien Bonin, Leonidas Blais, Arthur Gagnon, Zephirin Vezina, Chs. Edouard Eaton, H. A. Sims, Jean-Marie Pellerin, Frederick P. Yorston, James Joseph McGovern, Arthur De Grandpre, Moise Verronneau, George Tanner, Arthur Gould, Theophile Laurin, William Allen Cumming, Walter Johnston, William Ernest McKee, Walter Flood, W. William Francis, Alphonse Dorion, John James Andrews, Harry Lorne, John Alexander Misses Esther Kristal and Mary Rowland.

MEDICAL COUNCIL OF ONTARIO.

The annual meeting of the Medical Council of the College of Physicians and Surgeons of Ontario was held on the 27th of June in Toronto. Hon. D. Sullivan of Kingston was elected president for the ensuing

year. The chief matter before the council was the subject of reciprocity in medical registration, which was brought up by communications from Johns Hopkins University and from the medical councils of Quebec and Nova Scotia. A special committee consisting of Drs. Bray, Brock, Campbell, Hillier, Johnston, Macdonald and Spankie, was appointed to consider the matter.

The council made the following appointments to the Board of Examiners:—Descriptive anatomy, Dr. McKay, Oshawa; Dr. Ryan, Kingston. Midwifery, Dr. McCabe, Strathroy. Physiology and histology, Dr. A. Primrose, Toronto. Surgery, Dr. W. T. Parke, Woodstock. Medicine and surgical anatomy, F. H. Middleboro', Owen Sound. Chemistry and toxicology, Dr. A. R. Pyne, Toronto. Materia medica and pharmacology, Dr. J. S., Sprague, Stirling. Medical jurisprudence, Dr. D. Sinclair, Woodstock. Assistant examiner in diseases of women and surgery, Dr. R. Ferguson, London. Clinical surgery, Dr. O'Reilly, Toronto.

NEW BRUNSWICK MEDICAL SOCIETY.

The New Brunswick Medical Society held the twenty-fourth annual meeting in St. John, on the 19th July. The president, Dr. J. Douglas Lawson, delivered the annual address, the subject being Medical Societies, their beginning and development.

The following officers were elected for the ensuing year: President, H. R. Myers, M.D., Moncton; 1st vice-president, E. T. Gaudet, St. Joseph's; 2nd vice-president, Geo. N. Pearson, Sussex; Treasurer, G. G. Melvin; Corresponding secretary, W. H. Irvine, Fredericton; Secretary, L. R. Murray, Sussex; Trustees, G. M. Deacon, Milltown; J. McNichol, Bathurst; J. C. Mott, St. John.

The Thirtieth Annual Session of the Mississippi Valley Medical Association will be held at Cincinnati, Ohio, October 11, 12, 13, 1904, under the presidency of Dr. Hugh T. Patrick, of Chicago. The headquarters and meeting places will be at the Grand Hotel.

The annual orations will be delivered by Dr. Wm. J. Mayo, of Rochester, Minn., in Surgery, and Dr. C. Travis Drennen, of Hot Springs, Ark., in Medicine.

Request for places upon the programme, or information in regard to the meeting, can be had by addressing the Secretary, Dr. Henry Enos Tuley, Louisville, Ky., or the Assistant Secretary, Dr. S. C. Stanton, Masonic Temple, Chicago. The usual railroad rates will be in effect.

The Prince Edward Island Medical Association met on the 13th July,

in Charlottetown. The president, Dr. H. W. Robertson, occupied the chair and Dr. S. R. Jenkins acted as secretary. The following officers were elected: President, Dr. Jardine; Vice-presidents, Dr. Murchison, West River; Dr. McIntyre, Montague; Dr. McGrath, Bloomfield; Treasurer, Dr. Conroy; Secretary, Dr. H. D. Johnson; Medical Council: Dr. Conroy, President; Dr. S. R. Jenkins, Registrar; Drs. Kelly, McNeill, H. D. Johnson, McLaughlin and Murchison.

The American Academy of Ophthalmology and Oto-Laryngology will hold the ninth Annual Meeting, at Denver, on August 24th, 25th and 26th, 1904.

Dr. Franklin Oulton, of Moncton, died on the 4th of July in the fifty-fifth year of his age.

Dr. Victor Venner died in Campbellton on the 23rd of June, in the 55th year of his age.

Dr. N. A. Smith of Stanbridge, and formerly of Frelighsburg, died on the 24th of June. He was a graduate of McGill, and was in his 71st year.

The additions to the St. Boniface Hospital will be completed in May next, at a cost of \$250,000, and will make it the largest institution west of Toronto.

Dr. R. A. Dakin died on the 15th of June, in Pugwash, after a short illness of cancer of the stomach. He was born in Digby in 1836, and graduated at Harvard in 1870.

Retrospect of Current Literature.

SURGERY.

UNDER THE CHARGE OF GEORGE E. ARMSTRONG.

C. W. DEAN, F.R.C.S. (Edin.). "Acute Necrosis of the Lining Membrane of the Urinary Bladder." *The Practitioner*, June, 1904.

The case is a remarkable one not only on account of the rarity of such pathological condition, but also because the necrosed membrane was removed by a suprapubic cystotomy and the patient is now in good health. There was probably some disease of the bladder during boyhood as his water used to stop, and he had to get up frequently during the night to micturate. The present illness came on suddenly with complete retention. A soft catheter was passed 24 hours later, but could be inserted for only two inches when it became held so firmly it could not be with-

drawn. Calculus was diagnosed and the urethra opened, when a phosphatic stone was removed. The catheter was then passed into the bladder, but only a few drops could be obtained. The bladder was aspirated 24 hours later and again hardly any urine came away. The following day he passed the large quantity of 95 ozs. The temperature began to rise from this date, and symptoms of septic intoxication developed, though he was passing from 50 to 26 ozs. daily. About a fortnight later as the urine had dropped to 3 ozs., a suprapubic cystotomy was done and the cast removed. The pathological report shows it to be a portion of membrane from the bladder consisting of necrosed vesical mucosa, submucosa and musculature. Almost the entire thickness of the bladder had sloughed away, due to an extreme toxic action on the part of infective organisms. These are of two or three kinds, but the most numerous are streptococci. The infection appears to have been from within, as the mucosa and submucosa are thickly crowded with cocci which gradually become scarcer towards the muscular coat. The condition of the interior of the bladder before the suprapubic wound closed was curious. The sac would barely admit two fingers, introduced vertically, and rapidly narrowed towards the urethral orifice to form a sort of triangle. The walls were smooth, rigid, and non-contractile. The orifices of the ureters were patent and urine freely secreted. A later report states that the sphincter vesicæ seems to have regained some power, and the bladder now can retain as much as five ounces of urine, the patient knowing when he wishes to pass it, and is able to do it in a natural manner. This is distinctly interesting, as in the earlier stages the bladder was a mere cleft and it seemed much more likely that it would cicatrise completely than that it would again dilate and become a useful organ. It is thought by the writer that the necrotic action began prior to the removal of the calculus, and that the bacillus coli was the "foci et origo" of the condition.

WILLY MEYER, M.D. "When and how shall we Operate for Prostatic Hypertrophy." *Medical Record*, June 25, 1904.

The following conclusions are drawn regarding these two important questions. The surgeon should be able not only to perform perineal or suprapubic prostotectomy properly, but also to do Bottini's operation; for no one method of operating is applicable to all forms of prostatic enlargement, and we must, accordingly, select the operation that suits the case. In view of the present status of prostatic surgery, the catheter should no longer be advised as a routine measure in the surgical treatment of prostatic enlargement, but operative intervention urged as soon as the time for the regular use of the catheter has come. Prostotec-

tomy, being the most radical as well as the most surgical procedure, commands the first place, especially since the technique has been perfected to such a point as to render the operation a comparatively safe one, the mortality having been shown to be less than 5 per cent. The perineal route seems preferable to the suprapubic, for the reason that it enables the surgeon to do the operation more under the guidance of his eyes. The choice of route in the average case will probably hinge on the question of preservation of sexual power, provided this point is of importance to the patient. The patient's age, as such does not furnish a contraindication to operation, it is his general condition merely that has to be taken into consideration. When the effects of general anaesthesia are feared, spinal anaesthesia is indicated. If the operation with the knife be refused or contraindicated Bottini's operation should be advised, since it, too, yields excellent results. We have prostatectomy by the perineal or suprapubic route, and Bottini's operation, each holding its own place, and one complementing the other.

EDRED M. CORNER, B.Sc. Lond., M.A., M.B., B.C. (Cantab.) F.R.C.S. Eng. "The Value of the Imperfectly-Descended Testis; the Advisability of Operation, and the Value of the Operations Performed for its Relief." *British Medical Journal*. June 4, 1904.

The term "imperfectly-descended" is preferred to the more common one of "undescended testicles," the latter being regarded as clumsy and inexact. The value of the imperfectly-descended testis is given as follows: It can very rarely if ever produce spermatozoa, though there is a faint possibility of this occurring about the age of twenty and lasting a year or so. But it is endowed with very various capabilities with regard to assisting the development and perfection of other sexual features. The extent of these powers it is impossible to estimate, as the failures of the testis may be due to the same fundamental cause that has led to the absence of beard, male voices, etc. When the condition is bilateral the outlook is bad, as there is no known remedy for errors of development; but, if failure is only unilateral, there need be no alarm for the perpetuation of the species and the assumption of manly grace. If the testis is allowed to remain long in its imperfectly-descended position it will become largely functionless on account of undergrowing sclerosis, which may be hastened by torsion of the cord. Attacks of pain probably indicate spasmodic increments of that torsion, and abortive suicidal attempts at strangulation by the organ. Also, a hernia sac is found in about 70 per cent. or so of the cases. Hence, operation should be considered in every case of imperfectly-descended testis and adopted in a large number. To sum up the value of the various operative procedures,

it may be said that orchidopexy is only applicable in mild cases, and perhaps even then may not often be called for; while orchidectomy is only justifiable under special pathological conditions, e.g., torsion, severe neuralgia, extreme atrophy, and in older cases, that is after puberty and a possible and problematical period of testicular activity and spermatogenesis has passed, say from 23 upwards. Replacement in the abdomen is indicated in far the majority of cases, and should be always done before puberty, and, perhaps, up to the age of 20 or thereabouts. It would appear the earlier the operation the better should be the result. No operation may be called for in mild cases when the testis is close to the bottom of the scrotum, or when the testes are abdominally retained. Operative interference is demanded in most cases on account of secondary changes of an inflammatory and sclerotic nature in the testis, which the position of imperfect descent leads to. There is also the frequent coexistence of a hernia, and in cases where it does not often or never has come down previously, the narrow opening or neck of the sac may cause one of the most dangerous varieties of strangulation.

The acquired imperfectly-descended testis is almost always the result of an operation for the radical cure of a hernia, and depends upon one of three causes. The testis may be really an imperfectly-descended one, made to assume the normal position by means of the propulsion of the hernia, and so, when the hernia is cured, the testis is apt to assume its original position. Again, if the hernia sac is not well freed from the cord, on returning the sac into the abdomen the testis may be pulled up into a higher position. Lastly, by an improperly applied bandage the testis may become adherent to the scar of the operation. It is important to remember that imperfect descent of the testis is frequently accompanied by a hernia, and that a hernia may be accompanied by an imperfectly-descended testis, especially in children when the sac is a congenital one.

W. WATSON CHEYNE, F.R.C.S., Eng., and HAYDOCK WILBE, M.D.,
Durh., L.R.C.P., Lond., M.R.C.S. Eng. "A Case of Perforated
Gastric Ulcer in a Boy Aged Thirteen Years; Diseased Appendix;
Operation; Recovery." *Lancet*, June 11, 1904.

The interest of this case lies, in the first place, in the occurrence of a perforating gastric ulcer in a boy aged 13 years. The ulcer was a typical peptic ulcer. Gastric ulcers have been found in children, but apparently only of a tuberculous character. As to the cause of the ulcer, no suggestions are made, as there was an entire absence of any previous symptoms pointing to the stomach. The second point of interest is

that, partly as the result of the symptoms pointing somewhat to the appendix, and partly on account of the great rarity of the actual condition, the appendix was cut down upon in the first place, and was found to be long, thickened, a good deal reddened, and contained a large concretion. The third point of interest was the situation of the ulcer, being found high up under the diaphragm on the anterior surface of the stomach about one inch from the cardiac end.

W. L. B.

MEDICINE.

UNDER THE CHARGE OF JAMES STEWART, F. G. FINLEY H. A. LAFLEUR AND
W. F. HAMILTON.

JAMES BARR, M.D., F.R.C.P. "A Clinical Lecture on the Treatment of Serous Effusions." *Bri. Med. Jn.*, 1904, p. 649.

In this article the author suggests the use of adrenalin chloride as an injection into serous cavities after tapping to check the further outpouring of fluid. He relates a number of cases indicating, some of them in a striking manner, the benefits of this procedure.

In an elderly lady with malignant disease of the abdomen and metastases of the pleura, fluid collected so rapidly in the pleural cavity that the patient was scarcely free from distress in breathing between theappings. A drachm of adrenalin solution (1-1,000) was injected. There was no further secretion, consequently no further tapping, and the remainder of her life was spent in comfort.

Barr has injected as much as three drachms in cases of ascitic collections, due to cirrhosis, but as might be expected, the results were not striking.

In a boy with pericarditis, 19 ounces of fluid was withdrawn, and after a subsequent tapping and removal of 20 ounces, 40 minims of the solution were injected. The boy became pale and pulseless, owing, probably, to an excessive dose causing contraction of the coronary arteries, but rallied after the injection of nitroglycerine and atropine. No further tapping was necessary.

In addition to adrenalin Barr also recommends the introduction of sterile air to the pleura or peritoneal cavities. In a case of tuberculous peritonitis, threeappings, with the injection of adrenalin and sterile air produced a subsidence of the effusion.

F. WIDAL. "La Cure de Dechlorination dans le Mal de Bright." *Arch. Gén. de Méd.* May 24, 1904.

This method of treatment consists in the restriction of chlorides in the diet.

The writer was the first to show that the administration of chlorides favors the collection of water in the tissues of Bright's disease, and that diseased kidneys are frequently impermeable to these salts, or at least often eliminate a smaller amount than in health.

In a case of Bright's disease with predominance of the epithelial type, the patient was submitted, during a period of twelve weeks, to two dietaries, one containing salt and the other free from it. In four trials, during which chlorides were administered, the patient's weight increased, owing to hydration of the tissues, although on only two of these trials did actual œdema appear. On the other hand, when chlorides were withheld, the body weight diminished, owing to dehydration, and this result was constant in five separate trials. On a milk diet with ten grains of salt daily, œdema appeared; with a diet of meat, bread and potatoes without salt œdema disappeared, and albumen in the urine notably decreased.

The term pre-œdema may be used to denote the collection of fluids in the tissues, and its presence is indicated by the increasing weight of the patient. This feature is one of great importance, and is often accompanied by such symptoms as dyspnoea and hyper tension. Even the more marked nervous manifestations of uræmia may appear as the result of the retention of fluids in the tissues.

In many cases of Bright's disease the quantity of albumen follows the curve of the retained chlorides, and by withholding chlorides the quantity of albumen may be markedly lessened. The lessened permeability of the kidneys to chlorides varies in different cases and at different periods in the same case. In health 15 grains are absorbed and eliminated daily, whilst in the terminal stages of Bright's disease only a few centigrams may be secreted. On a milk diet about 5.5 grams of salt are ingested daily, yet even this small quantity may prove to exceed the excretory power of the kidneys, and consequently œdema tends to persist. If now the diet is changed to meat, potatoes and bread, free from salt, a lessening or disappearance of œdema and a diminution in the weight in the body takes place.

In order to estimate the permeability of the kidneys to salt, the chlorides should be estimated during a period of several days, a procedure which takes but little time or trouble. In practice the use of the scales may be substituted for analysis, and the quantity of salt lessened should weight increase and especially should œdema appear. The amount of salt ingested daily with an ordinary food ration is about 1.5 grams, and the amount of salt administered above this should be weighed to gauge the total quantity taken.

The duration of this treatment varies in different cases, and when a

diseased kidney may become permeable to salt it is useless to continue the treatment. Richet states the amount of salt necessary to maintain equilibrium in health is only 2.5 grams, the remainder being of use only as seasoning, so that a marked diminution in the quantity of salt is not any drawback in the value of food.

A diet free from salt is often preferred to a strict milk diet, and it may be made palatable by a little care in cooking. Meat with a little butter and lemon, potatoes roasted or fried in butter, various vegetables such as peas and carrots, may be used free from salt without any great hardship for a limited period.

AMBARD ET BEAUJARD. "Causes de l'Hypertension Artérielle." *Arch. Gén. de Méd.* March 1, 1904.

The retention of chlorides is a potent cause of high arterial tension, and in Bright's disease the impermeability of the kidneys to chlorides is frequently associated with high tension.

Six cases of Bright's disease are recorded with graphic charts, showing that a diet free from chlorides is accompanied by a lower arterial tension, whilst addition of chlorides to the diet is marked by their retention in the body and high tension. The results are rather vitiated by the fact that the salt was added to the same diet, but given in bouillon, a substance which, as Von Noorden has shown, is injurious in renal conditions. The experiments are suggestive, and merit repetition with the elimination of such an obvious source of error.

In one of the cases a purgative lowered the tension and at the same time produced elimination of chlorides to the extent of 20 grams by the bowel. The writers attribute the lower tension solely to chloride elimination.

The authors conclude that, with the exception of dilatation of the heart, high tension is associated with salt retention.

OBSTETRICS.

UNDER THE CHARGE OF J. C. CAMERON AND D. J. EVANS.

MAXIMILIAN HERZOG, M.D. "Placentation in a Uterus Duplex Bicornis Gravis, Menses 1—2." *Am. Jour. Obstet.* June, 1904.

This valuable contribution to the literature of human placentation seems to settle one or two hitherto disputed points.

The specimen was obtained by operation on a living woman, the case having been erroneously diagnosed as one of ectopic gestation. By a supra-vaginal amputation the whole uterus was removed and carefully preserved. The uterus was found to be divided into two bilateral masses, which were oval-shaped and united below into a single cervix, which was

divided into a double cervical canal by a strong median partition. There was a complete open cervical canal on each side of the partition, with two ora externa. The right horn of the uterus was somewhat longer than the left. In the right horn was found an ovum elliptical in shape with diameters of four and a half and four cms. It was found to contain an embryo twelve to thirteen mm. long, with an umbilical cord of the same length. The decidua in both horns was found to be thick and thrown into deep furrows and rugae, these being more marked in the right horn. There was found in upper part of the left horn a small round body four mm. in diameter, which projected over the surface of the surrounding decidua. This corresponded to the site of the placenta forming in the right horn, and seems to have been an effort on the part of the decidua to form a suitable nidus for the reception of an ovum, and to have resulted from the stimulus of the ovum in the other horn.

From a careful study of this remarkable specimen the author forms the following conclusions:—

1. The *syncytium*, is neither derived from the maternal vascular endothelium nor from the living epithelium of the uterine mucosa. Positive evidence that the syncytium has phagocytic properties has not been found, but the conditions as far as demonstrable rather speak in favour of the view that the rapidly extending syncytium insinuates itself into the clefts of the decidua, and between the decidual cells, and finally penetrates into the enlarged capillaries through the stomata of their extremely thin walls. In doing so the endothelia are to some extent displaced.

2. The cervix shows hypertrophied muscle cells, but its mucosa does not show the structure of decidua, but rather a very moderate amount of hypertrophy.

3. *Fetal and Maternal Blood*.—The chorion and the villi in a placenta, one or two months old, contain blood vessels. The statement made by Gebhard, that no blood vessels appear in the villi before the third or fourth months is not correct. The chorionic and villous vessels of a placenta one to two months old contain nucleated red blood corpuscles only of the type of metrorocytes of the first generation. Leucocytes are entirely absent. The intervillous space contains maternal blood of the type of the normal blood of the adult.

W. A. NEWMAN DORLAND, A.M., M.D. "Puerperal Hæmatoma. Tardy Development of a Fatal Case of the Vagino-Vulvo-Perineal Type."
Am. Jour. Obstetrics, June, 1904.

The author reports an interesting case of this rare complication of

gestation. The patient, aged 28 years, had suffered from an attack of inflammatory rheumatism at the age of nine years, which had left her with a mitral lesion. Her health had otherwise been good, though she was of a delicate disposition. In May, 1903, she had been delivered of a dead foetus in the fifth month of her pregnancy. In August of 1903 she again became pregnant. At first she suffered from severe nausea and vomiting, as well as from a severe attack of urticaria. In the sixth month a trace of albumen was noted in the urine, which disappeared under treatment. It reappeared in the seventh month, and the patient complained of abdominal distress and shortness of breath. Constipation was persistent. Early in April the patient fell into labour, and an eight-months still-born child was expelled in a few hours. The placenta came away normally, and a dose of ergot was given the patient. There was no sign of hæmorrhage or of collapse. The after pains were not severe. About 36 hours later patient began to bleed freely from the uterus, but stypticin and ergot produced a good effect. At this time a dark spot was noticed on the right labium majus, which slowly increased in size. There was also severe pain in the right ovarian region, and marked tympanitis rapidly developed. The usual symptoms of hæmorrhage manifested themselves, though the pulse was only 100.

Under treatment she improved, the bowels moved. Within a few hours the dark spot on the labium extended into the vagina and back on the external perineal surface as far as the rectum, which became patulous. The tumour felt tense but was not tender to the touch. Later the same day the patient experienced a sinking spell preceded by a sensation of tingling in the right hand and arm. The power of speech was gradually lost. The mind was clear and there was no facial paralysis. Complete paralysis of the right side then developed, and the patient died seventy-six hours after the birth of the child. At the post-mortem the peritoneal cavity was found free from blood. There was no hæmatomatous formation in either broad ligament, nor was there any involvement of the bladder. The clot was found to extend from the pubic mass was apparently encapsuled and tightly adherent to the walls of the sac. It measured 7 by $3\frac{1}{2}$ by 1 inch. The uterus was found normal in every respect.

The author suggests that it would be interesting to ascertain whether or not in these cases there always pre-exists a chronic valvular lesion or some chronic renal affection, as both of these conditions predispose to a varicose condition of the vessels of the lower portion of the body, which, in association with physiological thinning of the venous walls in gestation would strongly predispose to rupture and hæmatomatous formation.

A. G. STURMER, Lieut.-Col. I.M.S. "Forty-one cases of Puerperal Eclampsia treated by Thyroid Extract." *Jour. of Obstet. and Gyn. of the British Empire.* June, 1904.

The cases reported in this paper were under the author's observation in the Government Maternity Hospital in Madras. The treatment, which was instituted in Sept., 1902, and continued throughout 1903, was as follows:—On admission the patient was given ten grains of thyroid extract, and five grains every four hours afterwards. If the urine was scanty a saline injection of one or two pints was given under the breasts or into the axilla, and a hypodermic injection of morphia gr. ss. was administered and repeated, if necessary, in two hours.

The author states that many of the cases came from long distances, being transported in springless carts over bad roads, and had not infrequently suffered violent treatment at the hands of quacks.

The records of the Madras Maternity as regards Eclampsia are shown in the following table:—

	No. of cases.	Recoveries.	Deaths.	Per cent.
1871	16	9	7	44.4
1881	15	8	7	46.6
1891	23	21	3	13.0
1901	25	14	11	44.0

In 1871 the treatment consisted of 15 minim doses of veratrum viride every quarter of an hour, combined with potassium bromide. When the pulse fell to 60 the former was omitted, but was repeated if it again rose to 100.

In 1881 veratrum was given twice in 60 minim doses at intervals of two hours, and followed by a diaphoretic mixture.

In 1891 the treatment consisted of the administration of large doses of chloral and bromide, with chloroform during the spasms.

In 1901 no chloral or bromide was employed, but morphia in $\frac{1}{2}$ -grain doses at certain intervals combined with salines, chloroform being used as required.

From 1870 to 1903 there were 369 cases of eclampsia treated, with a mortality of 28.7 per cent.

The author always induced labour and terminated as easily and rapidly as possible. The author cannot account for the good results in 1891, which gave a mortality of only 13 per cent. In the 41 cases treated by thyroid, morphia, and salines as above outlined, the mortality was only 12.2 per cent.

The effect of thyroid was to induce a considerable increase in the flow of urine after two or three doses, and by the end of twenty-four hours every case showed a very considerable increase. The saline in-

jections, on the other hand, when used without the thyroid, failed to increase the flow of urine till twenty-four hours had elapsed. In the cases treated 27 of the children were born alive; of these eight died within three days after birth. Fourteen were still-born, and of these three were macerated. The author noted that most of the cases occurred on dull, cloudy days, and suggests that the cooler temperature acting on the skin precipitates the attacks.

ROBERT JARDINE, M.D., F.R.S.E. "Clinical Notes of a Series of Twenty-two Cases of Obstructed Labours, including Eight Cases of Induction of Labour, Four Cases of Symphysiotomy, and Ten Cases of Cæsarean Section." *The Jour. of Obstet. and Gyn. of the Brit. Empire.* May, 1904.

The cases reported in this paper were met with in the Glasgow Maternity Hospital in a service of six months. In the year 703 cases were delivered, and in this number there were 98 cases of contracted pelvis. Thus one case in every seven presented sufficient contraction in the diameter of the pelvis to render the delivery a matter of difficulty.

Cases of Induction of Labour.—There were all multiparæ, with histories of previous difficult labours. In five of them the C. V. measured $3\frac{1}{2}$ inches; two measured $3\frac{1}{4}$ inches, and one $3\frac{3}{8}$ inches. In all the operation was done in the interest of the child.

In one case craniotomy was required to deliver. The mother recovered. One case was delivered by forceps, and the others terminated naturally. One mother died of sepsis. One child died five days after its birth. Three children were stillborn, and four survived and did well.

The author takes issue with Williams, Pinard, Bar, and others, who condemn the operation, and advances the opinion that it is a perfectly justifiable operation in properly selected cases, especially in the hands of general practitioners.

"The great point to be decided in the matter is the size of the head relative to the pelvis, provided that the child has reached an age at which it will have a good chance of surviving." The child has a reasonable chance at the 32 week, but the nearer full term the better. If the head will not engage at this time Cæsarean operation at full term is to be preferred. Observation as to the relative size of head and pelvis should be made at intervals of one week.

Cases of Symphysiotomy.—All these cases were admitted in labour. Three were multiparæ, with histories of previous difficult labours, and one was a primipara.

In two of these the C. V. measured 3 inches, one measured $3\frac{1}{4}$ inches

and the other $3\frac{1}{2}$ inches. All the children were delivered by forceps. Three of the children were born alive, but nothing is said of the condition of the other.

In one case the knife would not pass through the joint, and while a passage was being sought, the joint gave way, and on examination the bone was found to have given away into the obturator foramen, and at the same time the left ramus had fractured about the junction of the ischium and pubes. The fractured end of the bone caused a laceration of the vagina during the delivery. The patient made a good recovery.

The author doubts whether the operation of symphysiotomy will ever become popular. His experience of the operation is limited to six cases; in all there was considerable laceration of the soft parts and in two of them severe hæmorrhage was encountered. The care of these cases after delivery is very difficult, the convalescence is at least two weeks longer than of the Cæsarean operation. He considers that 3 inches is the lowest limit for this operation, but the relative size of the head must be borne in mind.

Cases of Cæsarian Section.—In the ten cases, one was done for extensive cancer of the cervix and nine for markedly contracted pelvis. The recovery of all the cases was uneventful. In one case twins were encountered. All the babies were born alive. One child became excessively jaundiced on the second day and died.

In operating the author states that he makes an incision of about five inches in length, two-thirds of it being above the umbilicus. Cameron's pessary is used to prevent bleeding from the uterus while incising it. The uterus is incised longitudinally, so that the top of the incision will not be at the fundus.

He states that the placenta has been found on the anterior wall in nine-tenths of all his cases. Catgut sutures were used for the uterus and silk to tie the tubes.

The operation was usually performed after labour had started. In his opinion the operation is attended with little risk in suitable cases. The risk is greatly increased if the patient has been some time in labour and has been repeatedly examined. In such cases craniotomy should be performed in preference.