the Wolffian structure. The various analogues of the organs and the significance of the rudimentary organs in either sex were then considered and a limelight demonstration of specimens was given.—Dr. FOULIS, Professor SIMPSON, and Dr. MILNE MURRAY took part in the discussion on the paper and Dr. HART replied.

Dr. FREELAND BARBOUR gave the abstract of a paper on the Position of the Promontory as shown by Frozen Sections and its Effect on the Build of the Pelvis. Dr. Barbour while teaching students clinically found that there was very great difference in the height of the promontory of the sacrum above the symphysis. In order to determine this point accurately he made measurements of the pelves in 18 frozen sections. The anatomical conjugate was found to vary from 3·80 in. to 5·6 in. The obstetrical conjugate or the distance between the promontory and the nearest point of the symphysis varied from 3·44 in. to 5·28 in. This showed the available conjugate for obstetrical purposes. The difference between the anatomical and obstetrical conjugates varied from $\frac{1}{5}$ in. to $\frac{2}{5}$ in. In order to ascertain accurately the height of the promontory above the pubes a line is drawn from the upper part of the symphysis horizontally backwards; another line is carried from the promontory of the sacrum perpendicularly downwards till it meets the horizontal arc. The measurement of the perpendicular gives the accurate height of the promontory above the symphysis. There is great variability, the promontory standing as high as 5 in. and as low as 2·4 in. above the pubes, the average being 3·7 in. If the horizontal line is carried backwards till it impinges on the posterior wall of the cavity it is found in 12 out of 16 available sections to strike the second coccygeal vertebra or a point below it. From this it is learned that the whole sacrum and a portion of the coccyx is above the level of the upper margin of the symphysis. Another item of interest is the angle formed at the symphysis by the meeting of the anatomical conjugate and the horizontal line. This angle varies from 33° to 65° and gives what Dr. Barbour calls the "set of the brim." He also gave measurements of the horizontal distance of the promontory backwards from the symphysis. These varied from 2·0 in. to 4·0 in., with an average of 2·64 in.—Dr. MILNE MURRAY and Dr. BERRY HART discussed the paper and Dr. BARBOUR replied.

Reviews and Notices of Books.

Diseases of the Nervous System (Lewis's Practical Series). By CHARLES E. BEEVOR, M.D., F.R.C.P. Lond. London: H. K. Lewis. 1898. Pp. xvi. and 432. Price 10*s.* 6*d.*

THIS handbook consists in all of twenty-nine chapters. The first four are preliminary in their character, dealing with the anatomy and physiology of the nervous system in a succinct and lucid but necessarily somewhat sketchy manner and with the methods of examination which should be followed in investigating cases of nervous disease. The rest of the book is devoted, section by section, to a short account of the various diseases of the nerves, spinal cord, and brain, and when it is stated that this account is given in 330 octavo pages it will be recognised that the description of each disease is necessarily short. But everything is very clearly put and for the senior student or busy practitioner the book will, we believe, be found extremely useful. Some of the chapters are particularly good, notably those in which organic brain disease is discussed. We think the author has been wise in leaving rather severely alone the new conceptions of nervous disease which the theory of the neuron necessarily introduces. It is more than likely that our ideas of nervous disease will have to be made to fit in with recent anatomical discoveries, but these are as yet too recent to be dealt with satisfactorily in such a handbook as this.

Several minor points may be noticed, not merely for the purpose of finding fault, but with the view of indicating the possibility of the existence of differences of opinion. In regard to tabes, for example, it is stated that syphilis occurs in from one-half to two-thirds of the cases as a predisposing cause. If we are not mistaken Erb in his most recent series of cases found that the proportion was much higher—as much as 90 per cent., we believe. Then, again, pseudo-hypertrophic paralysis and idiopathic muscular atrophy are described as different diseases. No doubt it is true that typical cases are distinct enough, but according to the most recent teaching on the subject these varieties are most likely the different ends of a long series with intermediate examples of varied combinations of the two conditions. And we venture to doubt whether in reference to the surgical treatment of epilepsy it is quite justifiable even in cases where the character of the fit clearly denotes a localised disorder to remove the piece of the cortex corresponding to the part in which the fits commence. These, however, are all points on which an author is entitled to his opinion, especially if the opinion is backed, as in this case, by wide experience and accurate observation. In a small work it would, of course, be unreasonable to expect anything more than the expression of an opinion. We cannot expect to have also the data on which the opinion is based. It is a pity, we think, that an account from the neurological aspect has not been given of general paralysis. Nearly all the descriptions of this disease are given in handbooks of mental disease and naturally from the mental aspect. It is now well known, however, that there are many cases of general paralysis in which the mental symptoms are subordinate to the physical. These are cases which come before the neurologist and a description of them from the neurological standpoint would have formed a valuable addition. On the whole, however, the author is to be congratulated on a work which is clear and, considering its size, wonderfully complete, and the publisher on a most useful addition to an eminently useful series.

Vade Mecum of Ophthalmological Therapeutics. By Dr. E. LANDOLT of Paris and Dr. P. GYGAX of Milwaukee. Translated by Dr. E. NEYMAN of Milwaukee. London: J. B. Lippincott Company. 1898. Pp. 138. Price 3*s.* 6*d.*

THE purchasers of this small volume will find arranged in alphabetical order the names of the chief diseases of the eye intercalated with which is a list of the various drugs and methods of treatment which have been employed for their relief; cross references are in many instances given and the appropriate dose of each drug is appended. Perhaps an example will best show the plan adopted and we select iritis. "Iritis, plastic, rheumatic, arthritic, blennorrhœic, syphilitic. *Mydriatics:* Atropine (23 a), alternating with duboisine (102) or combined with cocaine (23 b) or a combination of atropine, cocaine, and duboisine (23 c). Should the pupil not be enlarged by these solutions: Extract of belladonna or duboisine in substance (having care to close lachrymal points by pressure). Close the eyes for at least five minutes after instillation. Always watch the intraocular tension; as soon as tonus is + replace the mydriatics mentioned by scopolamine (284). *Rest for the Eyes.*—Bandage the eye affected; dark room or smoked glasses according to cause and intensity of disease. *Avoid* sudden changes of temperature, draughts, &c. Blood-letting or dry leeches at temple. Iodine ointment (146 b). *Poultices* (255), hot compresses. For severe pain hypodermic injections of morphia (231 c). Laxatives, diuresis, and diaphoresis (305). Etiologic treatment: Where there are other symptoms of *rheumatism* salicylate of soda (275), antipyrin (15), antifebrin (14), alkalies, acetate of potassium (254), lithia water (225 b). Turkish baths. In case of urethral blennorrhœa, salol (278) and energetic treatment of the urethral trouble. In *syphilis*, specific treatment (291),

For dysmenorrhœa, scrofula and anæmia, strengthening treatment arsenic (20), iron (164), &c. *Continue mydriatics for some time* after inflammatory symptoms have disappeared. Should synechiæ capable of bringing on relapses remain iridectomy may be indicated." The numbers in parentheses refer to the corresponding headings in which the action and dose of the drug are given. It will be seen that there is little to be added to the above list of remedies which are employed in reducing iritis and that the work fully answers to its title. It will certainly prove very serviceable to those who are able to make a fairly good diagnosis of the nature of ophthalmic diseases, supplying them, as it does, with a concise pharmacopœia.

A Manual of General Pathology. By W. S. LAZARUS-BARLOW, M.D. Cantab., late Demonstrator of Pathology in the University of Cambridge. London: J. & A. Churchill. 1898. Pp. xi. and 795. Price 21*s*.

DR. LAZARUS-BARLOW has attempted a bold task and his attempt has met with no small amount of success. No original book dealing comprehensively with experimental pathology has previously been produced in the English language and the need for such a work was conspicuous. Cohnheim's "Lectures on General Pathology," translated by the New Sydenham Society, form, as they will no doubt continue to form for some time to come, the classic on the subject, and quite recently a portion of Thoma's valuable work has become available in English. But the translation of Cohnheim's work dates from 1882 and a more modern work is now necessary for students; while Thoma is so original in his treatment of some branches of the subject that he can hardly be considered to represent ordinary modern teaching in general pathology. Both the above-named works are, moreover, very bulky. This, then, is the gap which Dr. Lazarus-Barlow has endeavoured to fill and he has produced a manual which will be of very great value to the student. It is not fair to compare it with Cohnheim's book. Cohnheim was a pioneer in an almost unworked field and our modern teaching took its rise in his labours; his lectures remain as a monument to his originality and genius. At the present time a writer on general pathology must draw largely on the results of others, and a good student's manual must be mainly a judicious compilation, well balanced and critically edited. This work has been accomplished by the author in a very excellent manner, and the English student has now at his command a good and lucid summary of the main facts of experimental pathology presented within the reasonable compass of some 800 pages. The writer has, as he frankly admits, drawn freely upon Cohnheim's writings, and he has laid under contribution most of the important original work which has appeared in more recent times; in particular he admits his indebtedness to the various writers who have contributed to Clifford Allbutt's "System of Medicine." All parts of the book are naturally not equally good and it is not difficult to find fault here and there with individual statements. Thus on p. 63 both the anatomist and the practical physician will be surprised to read that "lesions of the tricuspid valve rarely produce any specific murmurs, partly by reason of the depth at which the valve is situated in the thorax and partly," &c., &c. The murmur of tricuspid regurgitation is a common one and the valve is more superficial than the mitral. Most bacteriologists will also learn with astonishment that staphylococcus pyogenes aureus is commonly present in the vegetations of simple endocarditis. It is not even the commonest organism in infective endocarditis. The pathology of the heart is, however, very well put from its physiological side and is soundly based upon experimental work. The author's own work on œdema is well known, and if he has treated this branch of the subject at somewhat undue length he may well stand excused on account of its interest and importance. This is perhaps one of the best sections in the book. The chapters on inflammation are full and clear and the chief objection to the author's concluding definition of that process is one which is common to all attempted definitions of inflammation—that it would convey to one ignorant of the subject no idea whatever of what inflammation is really like. The pathology of infection again is very well treated and there is a good criticism on the phagocyte theory of immunity. The pathology of fever is also excellently set forth. Space fails us to criticise in detail all the sections of the book, though certain omissions may be noticed. Thus under the theories of uræmia, we fail to find any reference to Bouchard's views, which, whatever opinion may be held as to their value, certainly merit discussion. No reference, again, is made to Cabot's book in the literature of blood diseases. It would, however, be unjust to insist upon such matters as these in face of the very signal service which Dr. Lazarus-Barlow has rendered in the production of this manual. He has done his work laboriously and conscientiously and has for the first time provided the student of pathology with a compendious and lucid exposition of the subject of experimental pathology—a subject which must more and more be recognised as lying at the very root of rational medical and surgical education.

LIBRARY TABLE.

A Practical Treatise on Sexual Disorders of the Male and Female. By ROBERT W. TAYLOR, A.M., M.D., Clinical Professor of Venereal Disease at the College of Physicians and Surgeons (Columbia College), New York; Surgeon to Bellevue Hospital, &c. With 73 Illustrations and 8 Plates in colour and monotone. London: Henry Kimpton. 1897. Pp. 451. Price 12*s*. net.—The branch of surgery with which this work deals is one about which very little is said in most text-books of surgery and yet its importance is by no means small, for whether we consider the frequency with which such cases present themselves or the amount of unhappiness which results from them it is very obvious that they are worthy of the most careful attention of the surgeon. Dr. Taylor deals in the first place with the anatomy and physiology of the male sexual apparatus and it is interesting to note that he is inclined to accept the results of the researches of Professor George S. Huntingdon, who asserts that the vesiculæ seminales never contain semen and that they do not act as places of storage of this fluid, but they provide a special form of mucus to dilute and carry on the semen. Impotence and sterility in the male are thoroughly considered and a chapter is devoted to the mental effects of sexual disorders. With regard to sterility in the male, the author thinks that probably in one case in six of unfruitful marriages this is the cause. The second half of the book deals with sexual disorders in the female. The final chapter treats of a peculiar new growth of the vulva, three examples of which Dr. Taylor has seen. He has already written on this condition in the *American Journal of the Medical Sciences*. In some respects it resembled a tertiary syphilitic condition, but potassium iodide seemed to have no effect upon it, and microscopically it appeared to be inflammatory. The volume is a trustworthy treatise on a difficult subject.

Transactions of the American Climatological Association for the Year 1896. Vol. XII. Containing Part II. of the Report of the Committee on Health Resorts. Philadelphia: Printed for the Association. 8vo. Pp. 293.—The American Climatological Association has not only for its object the study of climatology but also of hydro-therapeutics