1894

The medical student: v. 7, no. 1-8.

Vol. 7. FEBRUARY, 1895. No. 4.

THE MEDICAL STUDENT.

CONTENTS.

The Medical Student.

Published Monthly, from November to June, Inclusive, by the Students of the Boston University School of Medicine.

"When we have to do with an art whose end is the saving of human life, any neglect to make ourselves masters of it becomes crime."—*Hahnemann.*

Vol. VII. BOSTON, FEBRUARY, 1895. No. 4.

Entered as second-class matter at the Montpelier (Vt.) post-office.

Printed at the Argus and Patriot Office, Montpelier, Vt.

Editorials.

THE perplexing and all important question of "Where shall I locate?" is beginning to harass the minds of the senior class. To be assured that "There is *somewhere* the very place suited to you—if you can only find it,"—isn't much consolation. The finding it "is the rub." To locate in the place found doesn't require much skill. Whether 'tis wiser to locate in a large town or a small one? To go into partnership or to go alone? To go West and make some money, or to stay in Boston and borrow it? To go South, where they need doctors, or stay where the doctors need patients? These, with many others, are the questions which must be answered. To get a good per cent. on the above is more difficult than to pass all the dreaded finals, and in a long run they are as important to success.

THE extra session of the Boston Homœopathic Medical Society was notable for the interest manifested in the subject of the blood,—that highly important tissue. Prof. Sutherland talked in his own inimitable style about the Histology and Embryology of the blood. He was followed by Prof. Rockwell, who discussed in an interesting way the Physiology of the blood. Mr. Fred Strong then gave a few practical methods of preparing the blood for microscopical examination. No one could help appreciating the interesting display of specimens, prepared with so much labor and care, which showed different conditions of pathological and normal blood.

SOMETIMES we can't help wondering if it is absolutely necessary for the professors in a school like this to keep records of attendance, and in other ways keep accounts with the individual student as they would do were it a public school and the students were irresponsible children. It must be a necessity,

or no professor with his many cares would add this one, which must be very much of a burden. It therefore is a constant rebuke to the students of our school, who as men and women should realize so fully the importance of every day's work, and regular attendance upon the lectures, that there should be need of such account-keeping on the part of our professors, and the time thus taken could be used for something which would be of practical use to the students. Not one member of the school is so young and so lacking mentally that he does not know all this, and yet a small majority are careless in this regard, and thus necessitate what is surely an uncomplimentary proceeding. Why do several of our instructors find it a good plan to base the final standing in part upon daily attendance? Because they know very well that unless they do resort to something of the kind that some members of the school would rarely be present, and that those who were in attendance would be invited to share their notes, taken with no little care and sacrifice, with those who are taking times easy. It is therefore a protective tariff for some, and a compulsory education for others. If the instructors were convinced that such a system were no longer necessary, it would not be long before the plan would give way to something less humiliating and more appropriate to men and women who hope to fill responsible places.

WHEN you are inclined to criticize the MEDICAL STUDENT unkindly, just stop a minute and see if you can remember when you have sent in something of interest concerning students or alumni, or how often you have submitted to the STUDENT any little items on class happenings. Or have you ever considered just how much time it takes, and how many things must be attended to to make the STUDENT even as readable as it is? Such as we have we give unto you.

A SHORT TIME AGO we took occasion to call the attention of our friends to the library and the reference shelf in particular, but apparently the call was not loud enough, or long enough, judging from a remark that one of the professors made the other day, one who reads the STUDENT, too. It is not within the province of the STUDENT to beg for anything, not even for our library, but it ought to be distinctly understood that the reference library is sadly in need of assistance. Upon this the majority of students depend, and must depend, for their collateral or correlative reading, for it is out of the question with a large number of them to supply themselves with the necessary library. But it is a bit discouraging to one's aspirations to find that the only volume on the particular subject one desires to study, is stored away in a corner for the afternoon with somebody else who has the same intentions but comes a bit earlier. We *hear* a good deal about the present as contrasted with what used to be, but when the reference library is sought, the *used to be* predominates. What the library really needs is the recent books and lots of them. We hope our friends will not forget us.

WE welcome with pleasure the formation of a Y. M. C. A. in the school. Such an organization in a medical school was an almost unknown quantity until a very recent date, but at present many of the leading schools in the east have them, and an effort is being made by the intercollegiate Y. M. C. A. to effect an organization in all the medical schools and scientific schools in general.

THE microscopical labratory is open each afternoon until dark, thus giving the students opportunity to make up work or pursue original investigation. There is no one thing in medicine that offers greater possibilities than the use of the microscope, and the opening of the laboratory is a step in the right direction. A thoroughly competent instructor should be in charge the entire time, for the double purpose of preventing abuses and rendering needed assistance.

THE STUDENT notes with pleasure the formation of various societies and clubs in the school, whose principal object is to promote social relations among the students. These organizations show the presence of a social friendly spirit the cultivation of which cannot be otherwise than a benefit to all concerned. It is far too often the case in medical schools, for a variety of reasons, that the social side of life has too little attention paid to it, and it is in such ways as these that the students become better acquainted with each other. Of course the members of any one class

become quite well acquainted with each other through meeting in the lecture-room or clinic, and in some individual cases there is a certain amount of intermingling between the upper and lower classes, but it may be safely said that without something in the social line during the time we are in school together there is not that intimate acquaintance and fellowship which there should be. Then, too, from meeting day by day in the pursuance of our school duties, we see practically only one side of each others' lives—the professional—and to bring about that better acquaintance, that *esprit du corps*, which should be present in a school whose students are trying to fit themselves for the practice of the noblest of all professions, we should have as many interests in common as possible.

It may seem unnecessary and out of place, in the columns of this paper, to allude to such a subject as the matter of conduct in the lecture-room, in a medical school where the students are supposed to be men and women who are attending said school for the purpose of acquiring such knowledge as will fit them for the practice of the art and science of medicine, but we cannot help feeling that a few words on this head may not be entirely amiss here. We do not think it is saying too much to claim that it is not fair to the majority of the students who are trying to get as much out of a lecture or recitation as possible, to subject them to the annoyance of interruptions, which, to say the least, are often entirely unnecessary and out of place and certainly it is not kind nor civil treatment to the professor or instructor. Our lecturers, almost without exception, are busy practicing physicians, who give us the benefit of their time and experience, often at much inconvenience to themselves, and it is hardly fair to make their duties any more onerous than is positively necessary. But there is another side to this question which we cannot afford to overlook. It is true that the fault in these cases lies mostly with the students, and it is also true, in some degree, at least, that it is not the duty of the lecturer to preserve order in the lecture-room, as this is not supposed to be necessary. But if, through thoughtlessness or otherwise, the bounds of order are transgressed, and the lecture or recitation thereby interrupted, it would seem as though the instructor ought to exercise his or her authority in the matter, and request that at least a respectful degree of attention be paid to the matter in hand, out of respect for the position and dignity of the lecturer, as well as for the sake of the rest of the class.

An article on Potency, written by Dr. Kraft, of Cleveland, appeared in the January number of the *North American Journal of Homœopathy*, and from a novice's point of view, would seem to be a most sensible and logical manner of looking at this much-discussed question. Dr. Kraft contends that the physician, in prescribing for any particular patient, should select that potency which seems to be best suited to the general characteristics of the patient; or, as he puts it, "the patient himself is the factor to determine the potency to give, and not the degree of his illness." That is, to a laboring man, accustomed to lead a rough, out-door life, and presumably of somewhat coarse fibre, he would give a low potency; to a woman, presumably of sedentary habits, and used to being indoors, one of the middle potencies; and to the school-girl or child, a high potency. He also contrasts country and city practice, and says that in the former, the low potencies are most useful; while in the latter, the patients presumably having more highly organized nervous systems, he found the higher potencies more useful. This is, in brief, the gist of the article. No matter how unreasonable, from a physical stand-point, this question of high potencies may appear, we cannot afford to disregard the testimony of the many intelligent physicians who can show results from their use, and the least we can do is to suspend judgment until we have proved, or disproved their merits by individual trial.

General Contributions.

ARSENICUM, ITS DESIRES AND AVERSIONS.

BY PROF. J. HEBER SMITH.

Frequent thirst for sips of cold water (small quantities even are immediately thrown up, in cholera). No thirst during the chilliness; during the heat, frequent, but does not drink much; in intermittent fever, thirst for acid drinks.

Appetite increased, but more frequently loss of appetite. Desire:—for warm food; beer, brandy, coffee: milk; lard; fruits and vegetables.

Aversion:—to sweets; farinaceous food; gruel; meats; fatty things; butter; loathes even the thought and smell of food.

Satisfying the appetite causes heat and nausea; pain in the stomach or abdomen while eating or drinking, or immediately after; often vomits what has been taken—it comes up immediately, sometimes with diarrhœa simultaneously. (Compare Crot. tig.)

Gastritis and other affections from eating ice, ice cream, fruits, acid things, stale fish, clams or oysters. (Compare Carb. veg., Lycop.).

Gastro-intestinal symptoms worse after ice water, vinegar, sour beer, tobacco (chewing), spirituous liquors, spoiled sausage, or tainted meats and cheese.

Diarrhœa after eating or drinking; after midnight; from cold; from iced food or drinks; after milk; tainted meats; acid fruits; abuse of alcoholics; after burns; during dentition; during fevers.

Before stool: chilliness; anxiety; cutting in abdomen; vomiting, thirst.

During stool: chilliness; nausea; vomiting; tenesmus; burning in the anus and rectum.

After stool: tremulous weakness, even in very chronic cases, compelling the recumbent position.

THE MARINE LABORATORY AT WOOD'S HOLE.

The Marine Biological Laboratory at Wood's Hole was incorporated six years ago by eight men and two women "for the purpose of establishing and maintaining a laboratory or station for scientific study and investigation, and a school for instruction in biology and natural history." Annual meetings are held in Boston every November. Dr. C. O. Whitman, chief of zoölogy in the Chicago University, is the director. It is sustained by annual and life membership fees, by personal gifts of those interested, and by the tuition charges. About two dozen different colleges and universities have subscribed for "tables," and send students each year.

The work began in one wooden building, another was built later, the two were soon joined by a third, and last year a fourth, for the study of botany alone, was erected. The buildings are of unpainted wood, and appear all windows. There are larger rooms for laboratory work, where from twenty to thirty can be accommodated, and a number of smaller rooms for investigators.

The original purpose of the corporation has been fulfilled. There are in all, perhaps one hundred and fifty people who spend their summer at the laboratory. Some are college students, many are teachers of some branch of biology, and a large number are Professors and Ph. D's, who spend long four months' summers in original research. The departments available are, Embryology of Vertebrates, Zoölogy and Botany. In embryology the fish-egg is taken as the type, and the process of development from the first segmentation traced. All the microscopical technique necessary for preparing and mounting slides is taught, and serial sections preserved. In the botanical building cryptogamic botany alone is studied. In Zoology the majority of animals studied are invertebrates, and forms as low as the hydroids are taken up. The fee for the course in botany and also in zoology is thirty-five dollars, in embryology fifty, and investigator's room for the season, one hundred. Board may be had at the Laboratory Club House for five dollars a week, and rooms in the village for two dollars and more.

The laboratories are open from five in the morning till ten at night. Working hours for students are from nine to five, but the evening hours are often filled, and bright lights are seen in many investigators' windows long after the hour of ten. The work in Zoölogy is under the direction of Professor Bumpus, of Brown University, and covers six weeks, as do all the regular courses. Twice a week trips are made in the little steam-launch to different beaches within twelve or fifteen miles, and materials gathered for the next day's work, so usually one may study the animal alive before dissecting it. A lecture is delivered every morning from nine to ten. Once a week or oftener an evening lecture is given by some prominent biologist, and the lecture hall is filled to over, flowing with a very enthusiastic audience.

In two weeks, or less, the student is enveloped and permeated with a biological atmosphere, and speaks, thinks and dreams in biological terms. The study

becomes absorbing, and one is tempted to work day and night, but the average person soon finds this impracticable, and puts away books and microscope at five, to join the crowd of bathers who daily "go in" at that time.

Wood's Hole is two and a half hours from Boston on the Old Colony R. R., and is a most delightful and beautiful spot, although largely unknown to any but the "laboratory people" except as an uninteresting place to be gotten through on the way to Martha's Vineyard on Nantucket. The Boston train steams straight out on the wharf toward the waters of Vineyard Sound, and passengers step off and into the waiting steam boats, never getting an inkling of the cool woods and the beautiful and living waters which have made the place the choice of the biologist and the site of the United States Fish Commission. Neither the heat and dust of Boston's summer, nor as yet the fashionableness of four-mile-distant Falmouth has reached the spot. With Vineyard Sound on one side and Buzzard's Bay on the other, the point has really an insular climate, and one is refreshed even in the midst of work.

A NOMENCLATURE FOR THE DIFFERENT CLASSES OF INFECTIOUS DISEASES.

An article entitled "A Nomenclature for the Different Classes of Infectious Diseases," by W. H. Thompson, M. D., of New York, appeared last June in the *Medical Record*. As this is a matter upon which each one of us should have a definite idea, I would like to quote some extracts which may be of interest to the readers of the STUDENT.

Dr. Thompson begins by saying: "Medical terms become important as such, in proportion to their influence upon conduct. When the effect of the wrong use of some such terms may needlessly disturb the affairs of a household, and seriously alter the natural relations of its members to each other, or alarm an entire neighborhood, or empty a town, or greatly derange the commerce of a country, it certainly behooves the medical profession to endeavor to prevent all such misunderstandings by making the meaning of such terms as definite as possible. Vague fear is the mother of panic, and vague terms are the most potent generators of vague fears. When medical men themselves are not sure how the different classes of epidemic diseases should be distinguished from each other by descriptive names, the public can scarcely know what to think about them, and hence is open to the occurrence of as needless a fright as that about cholera, which cost the city of New York so much in the autumn of 1892."

The classification which Dr. Thompson suggests is as follows:

"All infectious diseases are due to the presence of their specific living micro-organism in the body.

"Infectious diseases are divisible into 3 classes—the communicable, the non-communicable, and the septic.

"The communicable diseases are those whose origin is from an animal body, examples of which are small pox, Asiatic cholera, and tuberculosis.

"The non-communicable infectious diseases are those whose origin is not from an animal body, but from a place or thing. Examples of which are ague, yellow fever, and miasmatic diseases in general.

The communicable diseases are divisible into two classes, according to the ordinary modes of their communication.—(1) into the contagious, and (2) into the non-contagious communicable diseases.

Infectious Diseases	Communicable	Contagious
		Non-contagious
	Non-Communicable	
	Septic	

"The contagious communicable diseases are those in which simple proximity to the infected with them is sufficient to communicate the infection to those susceptible to them, examples of which are, typhus fever, scarlet fever, small pox, measles, diphtheria, mumps, whooping cough, etc. Isolation of the sick with them, therefore, is needful to prevent infection.

The non-contagious communicable diseases are those in which the communication is not by simple proximity to the sick, but through intermediate means of communication. Isolation of the sick with them, therefore, is neither needful nor effective, in comparison with measures directed against the intermediate means of the infection. Examples of these diseases are typhoid fever, Asiatic cholera and tuberculosis.

"The septic infectious diseases are those in which the infection has gained entrance through a wound, or damage, by inflammation or otherwise, of the skin or of a mucous membrane. Examples of these

are surgical infection of wounds, erysipelas, hydrophobia, tetanus, etc. Lastly, all infectious diseases can be prevented by measures of disinfection applicable to each. When all infection is understood to be due to living micro-organism as its primary and essential element, all vague ideas of a relationship to poisonous chemical, physical, or atmospheric instrumentality will give place to more correct conceptions not only of what infection is, but also of what disinfection implies. The latter, indeed, is practically the more important of the two, for it is a familiar fact that people never do things so well as when they know why they should do them. The more thoroughly an enemy is known the more intelligently he is opposed, and when that enemy is known to be a living, though invisible thing, what will destroy its life is sure to be more needful than to endeavor to counteract its doings. Another reason for defining infectious diseases as always due in the first instance to micro-organisms, is that then it will be readily appreciated how their modes of propagation may vary widely according to the life-history of each species, rather than by only the one mode of contagion. Thus miasmatic diseases will easily be seen to be totally non-communicable as well as non-contagious, because yellow fever, for example, is not derived from an animal source and only diseases from an animal source can be communicable to other animals. Again, with the conception of the nature of infection, it will not be difficult to demonstrate that some communicable diseases may be able to pass directly from one animal body to another, while others only indirectly, for so do seeds in all nature, even in the highest vegetable forms, present us with precisely analogous contrasts in the modes of their propagation. It has been asserted, for example, that but for the humble ground squirrel. hickory, oak and chestnut trees would not be able to hold their own in our forests, against the trees whose seeds can be carried by the wind.

"The term communicable, seems to me particularly advisable to designate every disease whose origin as a disease is from some animal body previously infected with it, because this term will thus fasten in the mind the fact that no case of such disease has any other cause than by such communication. This conviction, of course, does go with the word contagious, but it at once becomes very indefinite in all infectious affections where the term contagious is inapplicable. Hence some designation is particularly needful which will always mean danger to others, even if there be no evidence of contagion, and the word communicable, as we have defined it, does just that. Let a disease be known as communicable, whether contagious or not, and attention is at once awakened to the need of preventing such communication. Nothing, indeed, would so powerfully enlist general co-operation with us toward abating tuberculosis, for example, as to have every consumptive patient and his friends become assurred that this distressing malady came to him, not *from* earth, air, or water (though perhaps by all three), but came instead to him originally from another consumptive. But I do not know of any other term than communicable which will serve this purpose, for all other terms which have been employed imply more or less the idea of contagion. Now we should not ignore the instinctive recoil of most persons against the word contagion. In an acute disease like scarlet fever, its dread presence is borne as well as may be, on account of the hope that ere long it will be past. But for a chronic affection like phthisis, acting like the slow blight of a withering curse, to have it also thought of as contagious is so repellent to patients and to friends alike, that every objection to the belief in such a doctrine will be sure to have its effect upon the mind. But with the designation communicable, but not contagious, the loving ministry of friends need in no way be checked by dread of touching the stricken one, while at the same time the name gives an effective note of warning against its further repetition in other persons. It is with communicable but non-contagious diseases, in fact, that a definite designating term is at present most needed, to prevent ignorant fears on the one hand, or ignorant carelessness on the other. I would restrict the appellation "contagious" to those diseases which are so directly communicable from body to body, that mere proximity to the infected is ordinarily sufficient to occasion the disease in others. That these diseases should have a term which would adequately suggest this element in them is very desirable, because there should be no doubt in their case of the immediate necessity for isolation. This question of isolation, indeed, overrides all others

when it is raised, for it always means inconvenience and hardship at least, if not cause for widespread alarm. I can see no objection to the old term contagious, if we use it in the sense ordinarily understood by the public, namely, a disease which may be contracted by going near one sick with it, without implying anything else about its mode of communication. In this sense the term has become as settled in our language as any other English word, and on that account never can be displaced. It will always be used whether we medical men wish to retain it or not, while new words, however good, have to wait a long time ere it be known whether they will be allowed to become naturalized in a language or not. Moreover, the precise mode of communication has nothing to do with this term, or, for that matter, with any other designation of infectious diseases, for with the majority of these affections we are still ignorant of the precise mode of their infection, and hence we would have to wait indefinitely if we would postpone classifying them until we could define them according to their specific ways of entering the body. What we do know about those diseases which seem to pass directly from body to body is, that whether they pass in one way or another, they do so commonly only at short distances, and that fact is enough to justify the choice of a term like contagious, which sufficiently expresses the danger of approaching the affected, without necessarily implying anything else, while it also distinguishes them from the communicable but non-contagious diseases, in which the danger is as great, if not greater, at a distance than in the immediate neighborhood of the sick.

"I have chosen the term septic to designate the third class of infectious diseases, mainly because of the familiarity of the public with the word as applied to what may be termed infectious by inoculation. Antiseptic surgery has made the idea and the conditions of sepsis both widely and correctly known, and to my mind it is no objection to the term that its use in medicine is rather restricted to purulent infections, for tetanus and hydrophobia are as strictly inoculable diseases as pyæmia.

"In this classification it is carefully stated that it is based upon the ordinary methods of propagation among the respective classes. That the active agents of some communicable contagious diseases may be carried to a distance by various media, as scarlet fever has been asserted to have been conveyed by letter, or in milk, does not militate against the statement that the usual mode of communication is by proximity to the sick. All infectious diseases probably can be communicated by inoculations into the blood, as it is claimed that ague has been so transmitted, but such wholly exceptional methods no more invalidate the designation of these diseases according to the normal modes of their increase, than to object to certain plants being termed tropical because they are often found growing in green houses.

"Finally, it seems fitting to direct attention to the fact that all classes of infectious diseases are alike capable of being disinfected out of existence, because the public should be educated to the possibility of ridding the earth of the great cause of unhealthy places or climates, namely, miasmatic diseases. It is doubtful if an unhealthy climate as such exists on the globe, except in the Arctic regions, from their extreme cold. Rather it is not too much to hope that in the coming century the world will become so much wiser, that a proper proportion of the enormous sums now wasted upon armies and navies will be transfered to sanitary bodies instead, with the result, already sure to be feasible, of disinfecting the soil by drainage and by other well known means until malarial fevers and affections will be matters only of history."

HYPNOTISM.

At the close of the clinic at Westboro on Jan. 18, which was the last of a series which has proved not only instructive but at the same time most enjoyable, Dr. Adams gave a short talk on the subject of hypnotism, in reference especially to its use in the treatment of mental disease. It is a matter in which he is deeply interested, and some experiments have been made by him, though as yet these have not lead to very satisfactory results, the insane being very difficult subjects for hypnotism.

It is interesting to read of what has been accomplished in this line, as given in a pamphlet entitled "Hypnotism," written by Frederick Björnström, M. D., of the Stockholm hospital, and translated by Baron Nils Posse.

Voisin, of Paris, has treated many cases most suc-

cessfully; melancholia, delusional insanity, hystero-epilepsy and acute mania, have all yielded to the hypnotic power as exercised by him, and the cures have been corroborated by assistant physicians. These results were only gained by long and patient effort; one hallucination at a time is attacked until the patient returns to his normal mental condition.

Alcoholism and dipsomania have also been the objects of successful experimentation.

Hypnotism has been used in surgery to some extent, notably by Dr. Esdaile, head surgeon at the Hospital of Calcutta; here from 1850 to 1860 he performed several hundred operations on hypnotized Hindoos with marked success. Contractures, convulsions, anæsthesiae, hyperaesthesiae, chorea, insomnia, disorders of digestion and of the urinary organs, and a long train of nervous ailments are added to the triumphs of the hypnotic treatment.

As a moral remedy, too, who can say what the future of hypnotism may be? Durand spoke of it as an "intellectual and moral *orthopaedia*," and at the congress of Pedagogues at Nancy in 1886 it was declared to be the opinion of this body that recourse should be had to this force in cases unmanageable in other ways.

Björnström says: "In a limited sense, suggestion plays a far greater role in normal human life, and appears daily, far more often than we think. Broadly speaking, suggestion generally constitutes an important part of all teaching, of the physician's treatment of the sick, of the influence of all men over each other, for good or for evil. * * * * By yawning, or pretending to yawn, I can cause a whole company to yawn. Laughter and tears are also directly contagious. My mouth waters when I hear a delicacy spoken of; all is suggestion when it is a direct, not fully voluntary, reflex action that passes through the brain.

"Suggestion has a vast field for its effects; it can be said to be as extensive as the nervous system in general, inasmuch as all forms of nervous activity can be induced by suggestion. Still more varied are the effects of suggestion within the higher psychical life, where thoughts, ideas, moods, desires, impulses and actions can all be ruled by it. This influence lasts not only for the moment and during the sleep, but by affecting the memory it also lasts far into the wakeful state through *post hypnotic suggestion* so-called."

On the other hand, with all the possibilities of good in the use of this marvellous power, there are to be considered the tremendous possibilities of evil. The hypnotized may fall victims to the most unscrupulous designs on the part of those who possess this power, and may even commit crime under the influence of suggestion, and recently several curious cases have come up in courts where decision was complicated by the plea of hypnotic influence.

To quote again from Björnström's pamphlet:

"It is our opinion that magnetism or hypnotism, the far-reaching effects of which on both the physical and psychical life of the human organism cannot nowadays be denied by any cultivated person, should be dealt with by legislature like deadly poison. None but licensed physicians should be allowed to practice hypnotism.

"What would be said if tramps were allowed to travel round and show the power of opium, of chloroform or chloral to put persons to sleep, or the power of strychnia to make one's limbs still, or the power of alcohol, belladonna, etc., to produce strange visions and delirium? We are astonished that hypnotizing in public is not already prohibited in all civilized countries where the question of poisons is regulated by law. On the other hand hypnotism should be freely allowed in the service of medical science. For its proper practice both the physician's knowledge and the moral responsibility of his position are necessary. In the hand of the physician this two-edged sword can become a great blessing, in that of others an unmitigated evil."

THE WESTBOROUGH INSANE HOSPITAL AND GOVERNOR GREENHALGE.

The following correspondence is self-explanatory:

BOSTON, MASS., January 5, 1895.

To His Excellency, Frederic T. Greenhalge, Governor:

The Boston Homœopathic Medical Society would most respectfully call the attention of your Excellency to the following passage from your Excellency's annual address to the general court:

"The institutions of the commonwealth are generally in a satisfactory condition. The hospital for the insane at Westborough, and the hospital for

dipsomaniacs at Foxborough, are perhaps exceptions. But improvement is already apparent at Westborough."

It appears to the members of this society that your Excellency expresses the opinion that the Westborough Insane Hospital is inferior to other similar institutions in efficiency and success. That your Excellency should entertain such an opinion is a matter of grave concern to the more than eight hundred homœopathic physicians in the state, and to their many thousands of friends and patrons. The Westborough Insane Hospital is the only state hospital under homœopathic management, and the members of this society and their friends and patrons have, therefore, watched its progress since its establishment in 1884 with the greatest interest, and they have had reason to believe that the work done there has been both significant and beneficent. They have ascertained from the annual reports of all the lunatic hospitals in the state that the Westborough hospital greatly leads all the others in its percentage of recoveries from acute mania, melancholia, and other forms of insanity which are recognized as curable; and under these circumstances, when it seems to be fulfilling the purposes of a hospital and an asylum for the insane with a higher degree of success than any other in the state, they are at a loss to understand how its condition can be other than satisfactory, and they most respectfully request your Excellency to indicate the grounds for the opinion expressed in your Excellency's annual address.

It was unanimously voted at the annual meeting of the society, at which more than two hundred physicians were present, to submit these views to your Excellency.

THE BOSTON HOMŒOPATHIC MEDICAL SOCIETY, by
HERBERT C. CLAPP, *President.*

J. EMMONS BRIGGS, *Secretary.*

COMMONWEALTH OF MASSACHUSETTS,
EXECUTIVE DEPARTMENT.
BOSTON, January 7, 1895.

Gentlemen:—The excellent spirit of your communication merits a candid and kindly reply. Believe me when I say I am not swayed by any narrow prejudices against, or in favor of, any so-called school of medicine. I recognize the value and the sincerity of the society which you represent, and the intelligent and benevolent purposes you have in view. For that reason I have been careful, *first*, not to arouse any of the old-time antagonism between systems of therapeutics, and *second*, to ensure, as far as I could, that this hospital in Westborough should properly and effectively represent your system before the people of the commonwealth. The defects alleged to exist may not in any way have reflected the influence of any special school; but the governor and council, through their committtees, have not been satisfied with the general management of the institution. A committee of the council, and, indeed, the majority of the whole body, have made personal examination of the institution, and, as I myself was prevented from being present, I have depended upon their reports. These reports were unfavorable. A vacancy occurring on the board of trustees, I took great pains to obtain as a trustee a gentleman of high standing, of large business experience, and of strong faith in the principles of homœopathy, Mr. Alden Speare, of Newton.

The investigations of the committees of the executive council were, I think, wholly free from any partisan or one-sided prejudice. In reply to your communication, and as the most direct way of getting at results, I would refer you, for more detailed statements of the alleged defects, etc., to His Honor, the Lieutenant-Governor, to Hon. Joseph R. Leeson, Ex-Councillor, and to Mr. Speare. The last named gentleman was of the opinion, as I was informed, that improvement had been made, and I was most thoroughly pleased with that report. My only desire and ambition is to keep all the institutions of the commonwealth up to the highest standard, and I know that you are interested in precisely the same way. With respect and esteem, I am

Yours cordially and sincerely,
FREDERIC T. GREENHALGE.

P. S.—Should any member of the committee be pleased to call upon me, I shall be glad to confer with them further. F. T. G.

BOSTON, MASS., January 9, 1895.

To His Honor, Roger Wolcott, Lieut.-Governor:

Sir:—It becomes our duty to transmit to your Honor the accompanying correspondence between the Boston Homœopathic Medical Society and His Excellency, the Governor.

His Excellency refers the society to your Honor "for more detailed statements of alleged defects, etc."

When the members of this society supposed that the Westborough Hospital was entitled to approval for better results in its work than had been attained in any of the other state hospitals, they were astonished to find that the Westborough Insane Hospital was the only one to receive at least implied censure. Will your Honor have the kindness to inform this society of the exact nature of these alleged defects, which it seems are sufficiently grave to require His Excellency publicly to express his lack of approval of the condition of the Westborough Insane Hospital?

THE BOSTON HOMŒOPATHIC MEDICAL SOCIETY, by
HERBERT C. CLAPP, *President.*

J. EMMONS BRIGGS, *Secretary.*

COMMONWEALTH OF MASSACHUSETTS,
COUNCIL CHAMBER.
BOSTON, January 11, 1895.

Herbert C. Clapp, M. D., 11 Columbus Square, Boston:

My Dear Sir:—I beg to acknowledge the receipt, yesterday, of your note of January 9. Until I heard the address of His Excellency, the Governor, read on the day of his inauguration, I had received absolutely no intimation that mention would be made of the Westborough Hospital. It is true that for two years past a somewhat unfavorable impression has been made upon the council, not only by their visits to Westborough, but also from other sources of information as well, and these matters were each year fully and frankly discussed with the trustees. They can doubtless give you all necessary information on the subject; but I may add that I shall be very glad to talk with you personally in the matter if you will call at my office (53 State St.), any morning between 9:15 and 11. I name these hours, as I am apt to have engagements later in the day.

Very truly yours,
ROGER WOLCOTT.

BOSTON, MASS., January 17, 1895.

To His Excellency, Frederic T. Greenhalge, Governor:

Sir:—The Boston Homœopathic Medical Society has the honor to acknowledge the very courteous reply of your Excellency to its communication of January 5. In accordance with your Excellency's suggestion it has communicated with His Honor, Lieutenant-Governor Wolcott, and has received a reply from him, a copy of which is enclosed. His Honor does not state in this reply the grounds upon which any unfavorable impressions, which he may have received in relation to the Westborough Hospital, were founded.

The members of this society are greatly interested in the work done by that hospital. They have noted with great pleasure its record in the cure of insanity, and they regret that a matter so important and significant as this record does not appear to have been taken into consideration by His Honor in reporting upon its condition to your Excellency.

From statements made by members of the board of trustees, to whom His Honor has referred this society for information as to alleged defects, it appears that the points which were brought to the attention of the trustees by the committee of the council on Public Charitable Institutions, had reference almost exclusively to the methods adopted for the cure of patients. Beyond the criticism that many patients were in bed and that some were under restraint, which is a part of the treatment that has vindicated itself by its success, the trustees were not informed of any well founded or substantial complaint of the Westborough Hospital except that it was badly ventilated, and as the Legislature of 1894, at the request of the trustees, appropriated a sum for the renovation of the system of ventilation, prior to the criticism of the lieutenant-governor, this defect, it is reasonable to suppose, will soon be remedied.

This society is of the opinion that any report concerning the condition of the Westborough Hospital that leaves out its record of cures is unfair to that institution, and unjust to the people of the state. Matters of ventilation and of domestic management are important, but they are manifestly less so than the fact that there is, and has been, a much larger percentage of recoveries at Westborough than at other hospitals. So far as this society can learn, no responsible person has openly made the charge that the patients at Westborough are negligently or unkindly treated. Whatever criticism has been made has been either of matters which are comparatively trivial, or of the methods taken for the recovery of patients.

In the eight years of its work, the Westborough Hospital has annually shown a larger proportion of recoveries in cases classified by the State Board of Lunacy and Charity as curable than any other insane hospital in the state. By its last report it appears that 68 per cent. of such cases have been cured, while the highest rate in any other hospital was but 36 per cent. as shown by published official reports. This most important fact in the history of the hospital, highly creditable to its management and the method of treatment, and which renders its condition not less, but more satisfactory than that of other institutions, is one of which your Excellency does not appear to have been informed, but which, in the opinion of this society, should be published to the people of Massachusetts.

Very respectfully,
THE BOSTON HOMŒOPATHIC MEDICAL SOCIETY, by
H. C. CLAPP, *President.*
J. EMMONS BRIGGS, *Secretary.*

COMMONWEALTH OF MASSACHUSETTS,
EXECUTIVE DEPARTMENT.
BOSTON, January 19, 1895.

My Dear Sir:—It is far from my purpose to impute defects to any worthy institution of the commonwealth. I am as much interested as you and your society in having the best homœopathic hospital in the country, but I have been obliged to rely upon the reports furnished me by the committee of the executive council. Unfortunately these were mostly, if not uniformly, oral, and I have therefore referred you to members of the council who had been most inter-

ested in this institution and its condition. I think that the best and fairest way of proceeding is to refer the matter to the council again, with special instructions to ascertain what specific defects there are now, (or were, if possible to determine), and what features as percentage of cures, etc., were overlooked. I had hoped that the gentlemen to whom I referred you would have been able to furnish the data necessary to a complete understanding of the case, and I think Mr. Leeson may have the data mentioned.

Permit me to acknowledge the receipt of your second communication.

Very truly yours,
F. T. GREENHALGE.

BOSTON, MASS., January 22, 1895.

To His Excellency, F. T. Greenhalge, Governor:

Sir:—Your Excellency's communication of the 19th inst. is still further proof that the unfavorable criticism on the Westborough Insane Hospital, in your Excellency's inaugural address, was not dictated by any unfriendly spirit, and so far as we can learn was founded upon vague "impressions" rather than upon any official report from the committee of the executive council. In regard to the proposition to refer the matter again to the council, it would seem to be wholly within the discretion of your Excellency, and should such a course be deemed best, this society desires that all possible investigation should be made. It, however, is of the opinion that an unfair impression in relation to the Westborough Hospital has already been given to the people of the state, which can best be met, in some degree, by the publication of this correspondence.

Very respectfully,

THE BOSTON HOMŒOPATHIC MEDICAL SOCIETY, by
HERBERT C. CLAPP, *President.*
J. EMMONS BRIGGS, *Secretary.*

SILK-WORM GUT.

The following notes are taken from an article on "Silk-worm Gut in Surgery," which appeared in a recent number of the *International Journal of Surgery:*

The best gut comes from Nurcia, a city in southern Spain. The eggs of the *bombyx mori*, or Chinese moth are used, and great care is taken in the selection and breeding of the eggs. They are hatched in incubators and prior to hatching are soaked for about 150 minutes in water of a temperature of 50, afterwards being laid out on canvas and a current of air passed over them for purposes of dessication. They are then put in incubators and the temperature is gradually increased from 62 degrees F. on the first day to 70 degrees on the seventh day, when the eggs are usually fully hatched. As soon as the worms appear they begin to feed and so continue for two or three days. They are fed on mulberry leaves, which are cut up very fine. The worm eats greedily for about four days and then goes to sleep for about the same number of days. On awaking the supply of leaves is renewed, and this condition goes on for about six weeks. At the end of this time the worm has become very fat and bloated, and is seen to be trying to climb onto any object that may be at hand. This is a sign that it wants to spin. They are carefully watched and when on the point of spinning are put into vinegar, which kills them at once. They are pickled in this way for about twelve hours, this being to give consistency to the guts, of which there are two sacs in each worm. On removal from the pickle and opening, the silk sacs are taken out and stretched to their limit, each making a long thread or strand. Each strand is covered with a fleshy coating called the *carne*, which has to be removed by the use of chemicals. The strands are polished by rubbing each one with a cloth, and sorted according to thickness and length. They are then tied up into skeins, each skein usually containing 100 strands, and ten skeins making a bundle. The round gut is worth about fifty per cent more than the flat, and the longer the pieces the more it is worth. The value of the gut is regulated according to its quality and length. The most common lengths are from eleven to twelve inches, but it is also found from fourteen to nineteen inches long. In selecting gut, one should be guided by its rotundity, hue and freshness. If the ends of the strands, which are fuzzy, are white, it is an indication that the gut is fresh. The color should be pearly white, glossy, and untinged by yellow. It should be smooth, and passing the thumb and finger over the strands will detect any inequalities. By turning the skein toward the light any defects may be made manifest.

THE WOMAN'S PROVERS ASSOCIATION.

This important society held its second meeting at Denver, completed its organization and listened to what may be termed preliminary reports of provings.

It is to be hoped that the society will push its work vigorously, for it is most important. The secretary, Dr. Sophia Penfield, writes as follows:

"A Woman's International Provers Association was organized at Chicago during the World's Congress. Officers were elected for the year: President, Dr. Martha Canfield; Vice-presidents, Drs. M. E. Avery, MacCracken, Jane Culver, Marion McMaster, Sarah Millsop, Millie Chapman; Secretary, Sophia Penfield.

"A large number of women physicians were interested in the work of proving. An old and familiar remedy, *conium mac*, was selected for the first year's work. Careful instructions relative to her qualification as a prover, and manner of proving, was sent to each member of the association. Each prover recorded general condition and symptoms for one month before taking the remedy, which was in the 30ˣ, 3ˣ, 1ˣ and . Press of work and other adverse influences caused an abatement of interest among the provers, but seven full reports were presented at the annual meeting at Denver.

"The provings were more interesting as a promise of future work by women than for any additional symptoms obtained. The two symptoms, sharply emphasized by the majority of provers regardless of attenuation, were, "Dull, occipital headache on rising in morning and continuous through day," and "dull ache in lumbar and sacral region." Depression, vertigo on rising, soreness of eyeballs, with orbital pain, colic with loose stools, numb aching and trembling of limbs were also accented.

"At the jubilee meeting at Denver a resolution was adopted to elect officers annually and to fix the annual fee at $1. The officers elected were: President, Dr. Millie Chapman; Vice-president, Dr. Julia H. Smith; Sophia Penfield, Secretary and Treasurer. The vice-presidents, appointed for each state at the World's Congress, remain in office during the year. The aid of every woman interested in the work is solicited to forward it."

CHOREA A SPECIES OF RHEUMATISM.

The rheumatic nature of chorea formed the subject of Sir Dyce Duckworth's paper read before the Eleventh International Medical Congress, held in Rome last April. The author cited numerous instances in which there was absolutely no difference between rheumatism and chorea, and claimed that it was impossible to distinguish either during life or after death any difference between endocarditis due to rheumatism and that which is supposed to be due to chorea. The various causes assigned for the production of chorea, such as shock, mental overwork, or physical emotion, he said, could only produce the disease in those who had inherited rheumatism, and as the manifestations of rheumatism were now very properly recognized when occurring in other parts of the body besides the joints, so he concluded that chorea might be considered as a variety of rheumatism specially affecting the brain.—*The American Therapist.*

We clip the following from a western paper: "The Fergus Falls Hospital is a living demonstration of the efficacy of homœopathic treatment of the insane. The institution has just closed its fourth biennial period of existence. At the beginning of the period there were 245 patients. Five hundred and twenty-six have since been admitted, and 219 discharged; 117 recovered, 25 improved, 19 unimproved, 57 died. Two hundred and forty-three were acute cases, 527 chronic (mostly 'transfers'). The present capacity is 550. A new wing, under construction, will increase the capacity by 175. Homœopathic remedies, hospital plan, rest treatment, intelligent nursing and doing away with opiates, have enabled the hospital to show this excellent record." At present two of our graduates, Dr. William O. Mann, '88, and Dr. Emelie A. Young, '92, are resident physicians in the hospital.

THE OLD OAKEN BUCKET.

With what anguish of mind I remember my childhood,
Recalled in the light of a knowledge since gained:
The malarious farm, the wet, fungus-grown wildwood,
The chills then contracted which since have remained;
The scum-covered duck-pond, the pig-sty close by it,
But worse than all else was that terrible well,
And the old oaken bucket, the mould-crusted bucket,
The moss-covered bucket that hung in the well.

Just think of it! Moss on the vessel that lifted
The water I drank on the day called to mind,
Ere I knew what professors and scientists gifted
In the water of well by analysis find;

The rotting wood fibre, the oxide of iron,
The algae, the frog of unusual size,
The water impure as the verses of Byron,
Are the things I remember with tears in my eyes.

And to tell the sad truth, though I shudder to think it,
I considered that water uncommonly clear,
And often at noon when I went there to drink it,
I enjoyed it as much as I now enjoy beer.
How ardent I seized it, with hands that were grimy,
And quick to the mud-covered bottom it fell;
Then reeking with nitrates and nitrites and slimy
With matter organic, it rose from the well.

Oh! had I but realized, in time to avoid them,
The dangers that lurked in that pestilent draught,
I'd have tested for organic germs and destroyed them
With potassic permanganate ere I had quaffed;
Or perchance I'd have boiled it, and afterwards strained it
Through filters of charcoal and gravel combined;
Or, after distilling, condensed and regained it
In potable form, with its filth left behind.

For little I knew of the dread typhoid fever,
Which lurked in the water I ventured to drink;
But since I've become a devoted believer
In teachings of science, I shudder to think.
And now, far removed from the scenes I'm describing,
The story for warning to others I tell,
As memory reverts to my youthful imbibing,
And I gag at the thought of that horrible well,
And the old oaken bucket, the fungus-grown bucket,
In fact the slop-bucket that hung in the well.

—*F. C. Bayles.*

B. U. S. OF M. G. AND M. CLUB.

The Boston University School of Medicine Guitar and Mandolin Club is composed of the following gentlemen: M. W. Smith and F. E. Schubmehl, (guitars); F. F. Strong (leader); W. S. Walkley, W. C. Newton, A. T. Thayer and B. C. MacNeill, (mandolins); F. X. Corr, manager. The club meets twice a week in one of the college rooms, and is progressing splendidly with its music. They hope to make their initial appearance in concert some time in April.

NOTE.—Another guitar is needed in the club. Application may be made to either Messrs. Strong or Corr.

It must be a terrible disappointment to work faithfully for full fifteen minutes in preparation for a quiz, and then not be quizzed. No one should run such a risk!

Locals and Alumni Notes.

Freshman advice to senior, Find out before you holler.

Did Charley Mack really get a bite, or did he get—nervous?

Isn't it great fun to be on the picture committee? Sich Larx!

Dr. Sutherland, is lecturing twice a week to the Freshman class in anatomy.

We are sorry to know of Professor Calder's ill health and hope he may soon recover.

Dr. N. L. Damon has returned from the south, much benefitted in health by his vacation.

Dr. F. J. Bothfeld, '88, has given up his work at Westboro and will enter private practice in Newton.

The class of '95 has discovered how very short "*sparking distance*" is. It is really quite *shocking*.

The Gregory society is having some interesting meetings and there are signs of life all along the line.

Professor Rockwell is taking a short vacation for a home visit. Dr. Coon carries on the work very proficiently.

The Seniors met and sat upon several important questions. The meeting was long, loud and breezy, which is characteristic of Senior sessions.

Dr. William O. Mann, '92, has given up his position at the Westboro Insane hospital to accept one of more importance in the hospital at Fergus Falls, Minn.

Where was Mr. Marclay's watch? Neither Mr. Marclay nor our reporter have been able to determine its whereabouts, nor account for its mysterious disappearance.

Dr. W. T. Talbot has been quite ill from septic infection on the lip. It is often very hard to account for these things, but frequently they come even to the most cautious.

Westboro Insane hospital at present has a dearth of resident physicians, indeed we see in the *New England Gazette* what might be construed as a plea for more help.

No caps and gowns for the class of '95! "It is so nominated in the bond." Many arguments, pro and

con, resulted in the above decision, the nays being considerably in the majority.

An extra meeting of the Boston Homœopathic Medical society was held Thursday evening, January 17. It was a *bloody meeting*, but one of the most interesting sessions of the year.

The class of '97 are about done with the work in the "anatomical observatory" and the '98's are whetting up their knives, and working up their courage, to begin an onslaught soon.

The Mandolin and Guitar club has been doing some good practicing, and judging from the sounds heard, it is about time for them to make their first appearance before the school, at least.

From 98: "In the January number Miss Slagle is down as being treasurer of our class. We wish to place the responsibility where it lies. Miss A. H. Bassett is the one that holds our funds."

The Sophomores are wrestling with the kymograph and the myographion and the sphygmograph, and the "graphs" are still looming up in the shadowy future, but the Sophomores are not daunted.

Members of '98 are closely watching the official notices, wondering when their turn will come to ascend to the "anatomical observatory." Certain members are getting ready for it by dissecting cats.

In the *Woman's Journal* of January 12 there is a little sketch entitled "Romance of a Wash-pan," from the pen of Sara Newcomb Merrick, '97. It is unique, and the students will be interested in reading it.

The article on Hermaphroditism by Professor Tod Helmuth, which appeared recently in the *Chiroman*, has been reprinted in pamphlet form, with illustration, and may be obtained through us at fifteen cents a copy.

Homœopathy has at last established itself in Boston public institutions. During the past month we have furnished no despised *prop* to the City hospital and have done all that could be asked in the way of *holding up* that institution.

Another organization has been added to the list. It is the Young Men's Christian association of the Boston University. The membership is already quite large, and new members are constantly being added. Chas. Libbey, '97, was elected president and A. G. Howard, '95, secretary.

When you go down town and have a boy along to carry things for you, you would better put a string to the boy and to the things, especially the things. If the boy is lost, he, like the cat, will come back, but the things—well, that's another story.

Mr. Fred W. Manley, '97, left for another school about the 1st of January. Not that he was displeased with this, but because the Missionary society which he is to labor under, has so dictated. The class of '97 was sorry to lose so earnest and able a member.

Do you want to vote for next year's editors of the MEDICAL STUDENT? Have you subscribed for it, and thus made yourself eligible? Haven't you a friend, or two or three, who would be interested in the STUDENT? Send it to them a year and see.

Another reception in the breeze! This time the Freshmen and Sophomores are the agressive parties. Let the good work go on. The better we know each other the more able and willing we are to condone the faults and commend the virtues in each other.

The class of '95 has made its last trip to Westboro, as a class. It cannot be positively stated, however, that certain members will not in time reside there. Mental symptoms have been discerned, which, in the eyes of an expert, point to serious derangements.

The January *Arena* contains an interesting collection of articles from different writers of note, which bears upon the age of consent laws of the United States. The question is discussed in its different phases, and gives a very complete synopsis of the subject.

Yes, why not have a nice reception room right away? When outside people are so anxious to help that they *offer* money and assistance, there must be a good many who would help if they were invited to do so. It is a worthy cause, and with necessary energy it is accomplished.

The Junior class is busy now with operative surgery, ("operatic surgery") and though their patient has sustained several serious operations his condition is no worse, judging from constitutional symptoms, than when they began. This is another testimony to the superior ability of the junior class.

Who would have thought that the senior class had such a firebug as one of its members proved herself the other morning at Dr. Jackson's office? Of course everyone knows there are many brilliant specimens in '95, but this one fairly scintillated, and all her good points were shown in their best light.

Miss Grace Shepard entertained a few friends on the evening of January 18th, and it is not necessary to affirm that her guests had a most pleasant evening. To omit mentioning the original poetry (?!?!), the dainty refreshments and the nice roomy piano stool (!!!) would be an injustice which the MEDICAL STUDENT could not tolerate.

The senior class nominated as class speakers, Miss Lakeman, Miss Owen, Mr. Barclay, Mr. Walkley and Mr. Shepherd. The senior class has a great abundance of good material, but there is no doubt that they made wise selections. The decision of the Faculty is awaited with much interest. Any one has a right to be proud of such honors.

"Verily a prophet is not known in his own country," for the other night, at the annual supper of the Homœopathic society, one of the officers was overheard to enquire of our reporter if he had seen any one connected with the paper, as it was desired that supper be served to him, and then he passed our hungry representative by without the offer of a crumb.

Dr. Conrad Wesselhoeft said among many other interesting things, "Disease is a runaway horse, and the doctor is the driver. The horse will keep on his course but you can steer clear of lamp-posts, telegraph-poles and the like, if you know how to drive. He may go around a corner, but careful handling of him will keep you from being thrown out." Again he says: "I wouldn't give aconite, belladonna, bryonia, and rhus. tox. all at once. Oh yes! That's what some of them are doing now."

From the Magazines.

The garbage question receives another final solution at the hands of Dr. Candee, of Syracuse, N. Y., in the *North American Journal of Homœopathy*. This question is bidding for supremacy among the health items of cities, though anti-toxine has the lead at present, and the more final solutions the better.

In the same magazine, Dr. Kraft, of Cleveland, O., combines the short and the long of it, or better, perhaps, the high and the low of it, in a paper entitled "Potency."

"When doctors disagree" might well be the heading of the two papers on the treatment of Hemorrhoids in the *New England Medical Gazette*. Each claims the best of results, and both are in a position to command the respect of the profession Observe for yourself, and draw your own conclusions, is the obvious moral.

"How to Prescribe for Infants" is discussed by Dr. Deschere, of New York, in *The Hahnemannian Monthly*. This is a subject very pertinent to the Dispensary staff, and the article is well worth reading.

In the same number, Dr. Youngman, of Atlantic City, N. J., reports twelve cases treated with *Stannum Iodide*. They were chronic chest diseases, with plastic tissue changes. Dr. Youagman seems to have considerable faith in the efficacy of *Stannum Iodide*, and his position is well sustained by the cases cited.

Book Reviews.

THE PRACTICE OF MEDICINE. *By William C Goodno, M. D., Professor in the Hahnemann Medical College, of Philadelphia.*

Volume 1, which treats of specific infectious diseases and diseases of the Nervous System, is ready for use, and is to be followed shortly by the second and last volume. The work is worthy of the highest commendation, and treats of disease from a thoroughly practical standpoint. As a text-book it is invaluable, and every student and practitioner should have a copy on his shelves for reference and study, as it far surpasses similar productions now in use. The treatment is considered in a clear, concise manner, and deals with hygienic, dietetic and physiological methods at length. The practice is endorsed and highly recommended by several members of our faculty, Dean Talbot and Drs. Percy and Wesselhœft having commended it warmly. Published by subscription by the *Hahnemannian Press*, Philadelphia. George, B. Carr is the Boston agent.

Stacy Jones, M. D., has just issued through *Boericke & Tafel* a set of PRESCRIPTION CARDS, which are intended to simplify the work of the physician in prescribing. Each card contains a list of symptoms, which is supposed to be placed in the hands of the patient, who will underline the symptoms which he has or is subject to, after which the card is returned to the physician, to be used as a guide in selection of remedies, and to furnish a record of the case.

LABORATORY GUIDE FOR THE BACTERIOLOGIST. *By Langdon Frothingham, M. D. V. W. B. Saunders, Pub.*

This little work gives simply and concisely the technical methods involved in bacteria culture, in staining, and in

preparation of nutrient media for laboratory work, and offers a scheme to avoid longer research, except for details. For general laboratory work it is a most useful desk companion. Illustrated, and with blank pages, price 75 cents.

NOTES ON THE NEWER REMEDIES. *Their Therapeutic Applications and Modes of Administration, by David Cerna, M. D., Ph. D. Second edition, enlarged and revised. W. B. Saunders.*

The Newer Remedies are taken up in alphabetical order, and their physical properties, solubility, therapeutic applications, administration, and chemical formulas given. It will in this way form a necessary and valuable aid to the various works on Therapeutics now in existence. The paragraphs on physiological action and toxicology, and in some instances those on incompatibility and contra-indications (a new feature of this edition) have been prepared in connection with the more important of the new remedies.

TEMPERATURE CHART. *Prepared by D. F. Laine, M. D. Has just been revised by W. B. Saunders, Phil.*

This chart provides room for recording sixteen observations daily of temperature, pulse, respiration, bathing, etc., in cases of typhoid fever where the method of Brand is employed. It thus provides, in proper form, one means of doing more accurate work in such cases. On the back of each chart is given the full method of Brand in the treatment of typhoid fever.

THE PHYSICIAN'S VISITING LIST *for 1895 is the forty-fourth yearly publication of the kind, by P. Blakiston, Son & Co.*, and can be obtained in varying sizes for 25, 50, 75, or 100 patients per day or week, and contains in addition to the regulation visiting lists blanks for monthly memoranda, addresses of patients and nurses, with references, accounts asked for, memoranda of wants, obstetric engagements, vaccination engagements, record of births and deaths, cash account, etc. The first pages are given up to Poisons and their Antidotes, Metric System of Weights and Measures, posological table, dose table to correspond with new U. S. P. remedies, which are incompatible (a valuable addition), list of new remedies, disinfectants, examination of urine, table of eruptive fevers, diagnosis of Bright's disease, diagnosis and treatment of simple diseases of the eye, treatment of asphyxia and apnoea. The book is bound in leather like a pocket diary, six by four inches, and is a neat and handy volume.

ESSENTIALS OF HOMŒOPATHIC THERAPEUTICS. *A Quiz Compend upon the Application of Homœopathic Remedies to Diseased States. A companion to the Essentials of Homœopathic Materia Medica, arranged by W. A. Dewey, M. D. Boericke & Tafel, Publishers.*

Students of medicine have found the Essentials of Materia Medica of signal value, and this new volume is in like manner systematized, condensed and simplified, giving to the student a concise application of his knowledge of materia medica of diseased conditions.

SYLLABUS OF GYNECOLOGY, *arranged in conformity with the American Text-Book of Gynecology. By J. W. Long, M. D., Professor of Diseases of Women and Children, Medical College of Virginia, etc. W. B. Saunders, Publisher.*

This work is based upon the teachings and methods laid down in the American Text-Book, and may be used as a supplement to it, as it contains numerous references to various subjects and illustrations in the Text-Book. It is also of independent value to the student as a guide in the lecture room, and to the practitioner it offers a convenient reference and aid in gynecological work. The subject is presented in a most systematic, clear, and practical manner, and the edition is interleaved for any additional notes to be taken.

SEXUAL NEURASTHENIA *Its Hygiene, Causes, Symptoms and Treatment, with a chapter on Diet for the Nervous, by George M. Beard, A. M., M. D. Edited, with notes and additions, by A. D. Rockwell, A. M., M. D. Fourth edition by E. B. Treat, Publisher.*

This work contains chapters on the nature and varieties of neurasthenia, evolution and relation of the sexual sense, the relation of neurasthenia to other diseases, sexual hygiene, the diagnosis, prognosis and treatment of sexual neurasthenia, with illustrative cases, and treats of the diet of the nervous. Dr. Beard calls attention to the prevalence of nervousness among Americans, and their liability to develop all or many of the symptoms of sexual neurasthenia under any exciting condition. The portion which treats of its relation to other diseases is of patent interest, dealing as it does with malaria, syphilis, cystitis, organic diseases, constipation, insanity, epilepsy, kidney diseases, neuralgia, inebriety, rheumatism, etc., etc., etc.

ANNOUNCEMENT. *E. B. Treat, Publisher, New York*, has in press for early publication the 1895 INTERNATIONAL MEDICAL ANNUAL, being the thirteenth yearly issue of this eminently useful work. Since the first issue of this one volume reference work, each year has witnessed marked improvements; and the prospectus of the forthcoming volume gives promise that it will surpass any of its predecessors. It will be the conjoint authorship of thirty-eight distinguished contributors and specialists from America, England, and the Continent. It will contain the progress of medical science in all parts of the world, together with a large number of original articles and reviews by authors on subjects with which their scientific reputation is identified. In short, the design of the book is to bring the practitioner into direct communication with those who are advancing the science of medicine, so he may be furnished with all that is worthy of preservation, as reliable aids in his daily work. Illustrations in black and colors will be freely used in elucidating the text. A most useful investment for the medical practitioner. The price remains the same as heretofore, $2.75.

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