ODOL

A correspondent asks for the formula of "Odol," a somewhat expensive English toothwash. It is advertised to an enormous extent in Great Britain, but has not as yet been given any great degree of publicity in this country. It has been claimed that the preparation is a by-product of the salol factories, though this has been denied. Formulas representing the results of various analyses have appeared in German pharmaceutical journals, and the following, by Aufrecht, is from Hager's *Handbuch der Pharmaceutischen Praxis*, Ergänzungsband, Ed. 1908.

Alcohol	89.00 per cent.
Water	8.00 per cent.
Menthol	2.00 per cent.
Saccharin	0.05 per cent.
Peppermint oil	0.05 per cent.
Clove oil	0.10 per cent.
Salol-like substance	0.05 per cent.

Correspondence

Hexamethylenamin in Poliomyelitis

To the Editor:—The article in THE JOURNAL, September 17, has crystallized my intention to send you a suggestion in regard to the treatment of the epidemic anterior poliomyelitis. There can no longer be any question as to the nature of this disease, undoubtedly an infection localizing in the spinal canal. The well established fact that hexamethylenamin is excreted or secreted in the cerebrospinal fluid suggests its possible use in this disease.

Within the past few weeks I have seen two instances of this disease, shortly after the onset of paralytic phenomena and have given large doses of urotropin (hexamethylenamin). In neither instance did the paralysis extend and both patients made good recoveries.

It is superfluous to say that nothing can be concluded from such an experience, but in view of our desperate helplessness in such cases, a drug, backed as hexamethylenamin is by some experimental work, may be tried.

ROBERT B. PREBLE, Chicago.

Medical Bibliography

To the Editor:—Medical bibliography is a subject of which the average practitioner knows little, and cares less. Yet with the constantly increasing mass of medical literature, and the growing army of investigators, some familiarity with what is being done in medical science is highly desirable to every intelligent member of the profession, and indispensable to any one who is attempting to do original work. The lack of this knowledge has often led to much that is both laughable and tragic in the breathless announcement, by men whose enthusiasm has outrun their learning, of facts already old and well known.

We must first of all realize that the living, growing body of medical science is in its periodical literature, and that text-books are only imperfect abstracts or summaries made for convenience, by which some acquaintance with certain facts is made possible for those to whom the more extended sources of information are inaccessible, or to whom more detailed knowledge is unnecessary. Medical literature at large, that is, in what may be called its raw state, contains a large mass of very diverse material; some of it no more than a gathering together of common-places; some of it a valuable generalization from known facts, and some of it, first-hand additions to scientific knowledge. A reference is usually made for the purpose of giving the authority for some statement, or a series of references, forming a "bibliography," for the purpose of giving the sources from which the present state of knowledge about a given subject has been derived. The proper work of the bibliographer is to digest the raw material of medical literature and to eliminate that which is irrelevant and useless, so that in the end, his "bibliography" may be complete in all essential particulars,

carrying no waste matter to confuse future students and squander their time.

In order that this may be done most effectively, and with the utmost economy in labor and time both to the bibliographer and student, certain conventions as to the form and arrangement of references should be adopted. It would be well if we could all agree that all references appearing in medical literature should be made to conform to the type or form adopted by the *Index Medicus* (e. g., Doe, (J.)). The functions of lymphoid structures, *Amer. Jour. Physiol.*, 1909, xx, 617.) Where the author has examined the original of the references, this would always be possible, and it would materially facilitate their use. Second-hand references, those which a writer incorporates in a bibliography on the authority of some other person, knowing nothing personally of their content or accuracy, should be marked in some distinguishing fashion.

I have before me a reprint, just received, from a young and brilliant colleague, containing the account of some interesting original researches. A bibliography is appended, containing about 500 references. Of these, not one gives the title of the paper referred to; many give no page numbers; many give no year of publication, and many others fail to give the volume. The verification of such a bibliography, even if one were in the Surgeon-General's Library, would be an interminable labor. On the whole, it looks more like a purely ornamental addendum to the simple account of some scientific investigations, than like anything of real assistance to future students.

If our medical colleges could add to their courses a few lectures on the use of medical literature, or a definite course in bibliographic research, it would be not only of immense value but of fascinating interest to all so fortunate as to participate. We should soon have a class of medical graduates whose horizon would not be limited by the text-books they used in college and what their professor said.

And, finally, medical editors have at their command the most powerful means of improving the whole situation, not only by the publication of "Indexes," as some now do, nor by abstracts of current medical literature, which is most useful, but by educating their contributors and readers in addition, to that accuracy and uniformity in bibliographic matters which would eventually be helpful to us all.

HAROLD WILSON, Detroit.

[COMMENT:—The failure of authors to give complete bibliographic references, accurately and uniformly, constitutes one of the trials of the editor. THE JOURNAL has prepared a pamphlet on "Bibliographic Style" to which all references in THE JOURNAL and in *The Archives* are made to conform. Authors generally fail to follow any consistent system in preparing their references to other articles. In some cases, doubtless, it is too much to expect that they shall provide every detail. It is a far different matter, however, for an author to have his stenographer copy on his manuscript a lot of references that he finds tacked on some other article on the same subject. Often this seems to have been done without verification, without completion, without any reason apparent save the desire to have a bibliography with the article. Some one has said that this ought to be made gross unprofessional conduct—a sentiment with which many will sympathize who have tried to make use of such an abomination.—Ed.]

Maritime Quarantine.—In Bulletin 34 of the Public Health and Marine-Hospital Service the facts of maritime quarantine practice are arranged in a compact and interesting form. The boarding, inspection and judgment of vessels, quarantine treatment, station management, descriptions of stations, duties of officers, disinfection and disinfectants, apparatus, etc., are all concisely described and freely illustrated with half-tones. It contains valuable information not only for the maritime quarantine service, but for sanitarians and health officers generally.

1. Sent on receipt of 10 cents in stamps.