Herman and Perutz, and others, the reactions are less well defined and more difficult to read and more prone to error on the personal equation than the Wassermann reaction and, likewise, probably less delicate and valuable as a diagnostic reaction than the Wassermann test when the latter is properly conducted by experienced persons.

Bergeron, A., and Normand, E. APPLICATION OF A COLORIMETRIC SCALE TO THE BORDET-WASSERMANN REACTION. [*Presse médicale*, September 12, 1918.]

Using as primary color standard, 0.2 mil of a one in ten dilution of sheep erythrocytes. For the colorimetric tests this is further diluted, one in five, by the addition of saline solution. In a series of hemolysis tubes, numbered one to ten, are introduced in succession 0.1, 0.2, 0.3, etc., of the resulting fluid. Enough hemolysin and alexin are then added to induce complete hemolysis, and the amount of solution made up with saline to 2.5 mils in each tube. The tubes are then placed in the incubator until hemolysis has occurred. The tint in the first, or 0.1 mil tube, correspond to that produced by a ten per cent. hemolysis of red cells employed in the Wassermann reaction; that in the 0.2 mil tube to twenty per cent., hemolysis, etc. To offset the additional coloration imparted in the actual reaction by the patient's serum and the antigen, 0.2 mil of any human serum and 0.3 mil of antigen are added in each tube, thus bringing the total volume of solution to three mils. In carrying out a colorimetric determination, the centrifugated Bordet-Wassermann tubes are compared in turn with the ten tubes of the color scale. If the tube containing the least amount of antigen shows the same tint as tube three of the scale, it is known that enough free alexin has remained to hemolyze thirty per cent. of the erythrocytes in the first instance and ten per cent. in the second, and the reaction is put down as positive at 30-10. If the eighth and sixth tubes are matched, the reaction is negative at 80-60, and if the sixth and fifth, it is suspiciously negative at 60-50. This precise method permits of ready comparison of the successive findings of a single observer as well as of the results obtained in different laboratories. The scale is independent of the procedure used.

Jacobsen, C. NEUROSYPHILIS OF THE AUDITORY AND VESTIBULAR. [*Ugeskrift for Læger*, March 13, 1919.]

Sudden deafness, subjective noises in the ear, or vertigo with vomiting were the initial symptoms in four patients reported in this paper, due either to neurosyphilis or to arsenical action as a Herxheimer reaction to arsphenamin. The author advocates a preliminary use of mercury in all the type of case here reported in order to avoid the kind of accident that seemed to result from the use of arsphenamine.