REVIEWS.

ART. XXIV.—*Lehrbuch der Krankheiten der Weiblichen Sexual-Organen.*

VON DR. F. W. SCANZONI, Königl. Bayr. Geheimen Rath und Professor der Medecin an der Universität zu Würzburg. Fünfte umgearbeitete Auflage. pp. 829. Wien, 1875.

Text-book of the Diseases of the Female Sexual Organs. By Dr. F. W. SCANZONI. Fifth improved edition. Vienna, 1875.

THE fact that a translation of this work has been made and published in this country, and is doubtless in the hands of many of our readers, may seem to obviate the necessity of anything more than a mere notice of its continuance. Yet medical science is advancing, and no department of it more rapidly than gynecology. It is eighteen years since the first edition appeared, and as the duty then devolved upon us of introducing it to the profession here, a natural interest impels us to examine the present and note what changes it has undergone since then. That it has been increased in bulk by the addition of about two hundred and fifty pages, that its success at home is marked by reaching the fifth edition, these are matters of small moment. It is far more interesting and important to note what changes of doctrine there may be in its pages. At the time of its first appearance the author was in high repute and high position; the years since then have only added to his reputation, and he is now quoted as an authority in obstetrics and gynecology wherever medical science is cultivated. His matured opinions upon some of the important and still unsettled points of practice in this department cannot, therefore, but prove of interest to students and practitioners everywhere.

There are two most excellent characteristics of a medical work well marked in this book. The first is that the author has very decided opinions of his own; the second, that these opinions have been formed from his own clinical observations and study. If the first leads, in some instances, to more prolixity than necessary, and if his replies to some of his critics render some few portions polemical in character, these blemishes are amply atoned for by the plain statement of his convictions and the firm basis upon which his doctrines rest. It is not maintained, of course, that his opinions and doctrines are necessarily correct, but there can be no mistake as to the honesty of such a writer, while his opportunities for observation have been ample. His experience has led him, as we shall see, to differ in regard to some very important points in gynecological practice, and in our notice of the work we shall rather attempt to state his opinions than to criticize them, to give the results of his experience than to weigh the evidence for or against doctrines not in accord with authorities in our own language.

A perusal of the preface of the present edition shows us the author's opinion of extreme doctrines, his position as to various "schools" of gynecology, and leads us to infer that such exist to a greater degree in Germany than here. He leaves no doubt as to his views even in the

opening paragraph, declaring that his introduction is not so much to state the appearance of a new and improved edition as to give his professional brethren to understand that "the highly praised so-called 'revolution' in gynæcological practice has not caused him to give up the original plan of his book and to re-cast it in accordance with the views of some modern prominent American and English gynæcologists."

"A gynæcological practice of almost thirty years," he continues, "has forced upon me the conviction that the device of the modern school: 'local disease, material explanation, and mechanical treatment,' as a general proposition, leads astray, since it produces skilful routinists, but not physicians, who, if their treatment is to be a successful one, must keep constantly in view the connection of the local disease with more or less distant physiological actions and pathological processes."

He appeals with confidence to those familiar with his former writings to bear witness that injustice has been done him when he is reproached with under-estimating the value of operative procedures in gynæcology.

"I know only too well that there are a not inconsiderable number of diseases of the female sexual organs which defy all medical treatment, and which offer only to the surgeon an advantageous field; I am also far from being afraid of the knife; but I challenge a practice which conducts operations without a foundation based upon anatomical, physiological, and pathologico-anatomical facts; operations which are partly useless, partly dispensable, and partly, finally, so circumstanced, that the gain of them is heavily over-weighted by the dangers attached to them."

"While I have always voluntarily recognized, as I now recognize, the true worth of the operative part of gynæcology, I oppose in the most strenuous manner, the extravagances which in modern times have sought to establish themselves, and which, alas! are only too well adapted to lead the young and less experienced physician astray, and force views upon him of whose dangerous tendencies he only first becomes conscious after he has learned, by more or less sorrowful experiences in his own practice, that not every doctrine which rejoices in a glittering raiment is really gold."

Passing to the body of the work, we cannot avoid quoting from the general observations upon the symptoms caused by uterine disease the following very positive testimony as to the necessity of a careful study of disease of the sexual organs of women on the part of the general practitioner. It is to be hoped that the necessity for such a quotation will not much longer exist, but that it does still we know from observation and from the statement of all writers upon the subject.

"The most varied alienations of the mental powers, the most surprising anæsthesia and hyperæsthesia of limited portions of the body, the most obstinate neuralgias, and numerous spasmodic and paralytic affections of certain groups of muscles have, if not always, yet by no means seldom, their sole origin in the presence of uterine disease, and can only be ameliorated or entirely cured by the curing of this."

In regard to the examination of patients, he still as formerly places the highest estimate upon the value of the touch, which is to be learned only by practice at the bedside, and does not hesitate to say that he who is not thoroughly versed in this procedure is not fitted for practice. He advises the touch *per rectum*, to correct or sustain the information derived from the other. In regard to the value of Simons' method of introducing the hand he does not commit himself, but does not seem favourably disposed toward it. As to the speculum, he regrets that its use is not more general among practitioners in his country. To use it, he places the patient on the back

with the pelvis elevated, and of the different kinds, prefers Fergusson's silvered glass instrument. In the first edition it was stated that it could not be obtained in Germany, except at a very high price; this objection is now removed, and, although he admits that cases do occur in which the polybladed instruments are better, the cases in which they afford greater advantages "belong to the rarities." Upon this point he is quite strong in his expressions, and bases his advice upon what he has learned from actual experience with such instruments as those of Charrière and Cusco. In regard to Sims' speculum, he considers its adaptation to general use and decides adversely to it, while commending it for certain cases and manifest advantages in some respects.

The author is no great friend to the uterine sound. His views have not changed in regard to the needlessness of resorting to this instrument upon every occasion, and the frequency with which serious mischief is occasioned by it. He has learned the advantages of, and adopted, the flexible instrument of silver or copper, and in this respect is in advance of some European gynecologists.

He advises the use of sponge-tents for dilatation of the uterus, but bears testimony to the dangers which sometimes result from their use, for which reason he much preferred those of laminaria until, as he says, he learned from Sims a mode of using them which was free from danger. The value of metallic dilators, for non-puerperal cases, he does not estimate very highly.

The chapter upon general therapeutics opens with the admission of the necessity for local application, in the treatment of uterine diseases, with the expression of the fear, however, that we have gone too far in that direction, over-estimating their value and neglecting general measures. In local depletion, he decidedly prefers leeching the uterus, a process which he shows to be anything but of recent origin, and uses scarification only when the patient is decidedly anæmic, or when but a slight effect is desired. For caustic applications he uses nitrate of silver, solid or in solution, tincture of iodine, and sometimes the nitrate of mercury. He is averse to the employment of Vienna paste and caustic potash, and we find no mention of the use of fuming nitric acid either to the cervix or cavity of the uterus. He advises the actual cautery, but only for carcinomatous ulcers or such as have obstinately resisted other treatment, and still, as formerly, advises its secret employment, the patient being under chloroform, and not told of what is to be done, for fear of terrifying her. Melted sealing-wax is again recommended as an application to ulcers of the cervix. We have never heard of the author being followed in this particular practice.

For intra-uterine cauterization, he uses the nitrate of silver in a caustic holder, and we find no mention of by far the most convenient and safest means of application, that by Lente's coated probe. He is very favourable to the use of intra-uterine injections, and urges at some length their innocuousness, his principal arguments being his own experience, and a long series of experiments which he instituted, and by which he was convinced that fluids could not be forced into the abdominal cavity through the Fallopian tubes except by a force which would never be used on the living subject. He explains the occurrence of many of the attacks of peritonitis following this procedure, by extension to that membrane of an endometritis set up by the irritating fluid. Nevertheless he counsels dilatation of the cervix always that there may be free exit for the injected fluid.

"In no case in which this has been done, have we seen arise those violent pains which in former times, when we neglected this measure, came so frequently under our observation, that we made use of a therapeutical resource, with a certain dread and only in the most pressing cases, the great value of which, in the treatment of profuse long-continued uterine catarrh and certain kinds of hemorrhage, has always been recognized by us."

Various medicines in the form of unguents are advised, but for application to the vagina only. The special application of chloroform vapour is still highly recommended, especially for uterine colic, and an apparatus figured for its application.

The consideration of the use of vaginal injections occupies several pages. The temperature of the fluid used, and the force with which it is thrown in, are important elements in the use of this measure, warmth being one of the most important means to promote the liquefaction and absorption of plastic exudations, and those in the uterine parenchyma or around the organ rapidly disappear under the use of the hot douche. The local use of hot water as a means of allaying pelvic inflammations and promoting the absorption of pelvic exudations, has recently been announced as a new thing and a purely American discovery. Candor compels us to state that this doctrine is plainly taught here, just as it was in the first edition of the work. The effects of this remedy are said to be decidedly increased when the stream is thrown with considerable force, mechanical irritation supplementing the effect of temperature, an irritation which, on the other hand, should be avoided when cold injections are used for checking hemorrhage.

The author's views in regard to the pathology of that condition generally termed "chronic metritis," are probably well known. He is one of the prominent members of the "German school," which has led the way in promulgating correct views as to the real state of affairs in this affection. It is no longer an inflammation, or an hypertrophy, or an "engorgement," but an increase of the connective tissue of the organ, a "hyperplasia," and although he still heads the chapter "chronic parenchymatous inflammation," he teaches, as heretofore, that the term inflammation is a misnomer. He traces at some length the progress of the disease through the two stages, which are well marked, of infiltration and induration, and admits an increase of the muscular tissue of the organ, although not to the extent of the connective tissue.

"From all of which it results that the term chronic metritis does not really belong to all the cases to which it has been applied, that many, even perhaps most of the enlarged uteri characterized as inflammatory have nothing of an inflammatory nature in the correct sense of the word; they are changed conditions of nutrition, such as we see arise in other organs as the result of prolonged hyperæmia."

As the name indicates, the disease is essentially a chronic one, and its obstinate resistance to remedies is fully recognized by the author. When it is of long standing, a perfect cure, he says, is scarcely to be expected, and a perfect return to undisturbed health has not, in a single instance, fallen under his observation.

For the treatment of those cases in which the shorter duration of the disease, or the age of the patient, allows of hope for cure, and for the amelioration of all others, his principal remedies are local depletion and the application of warmth, while he lays stress upon the value of mild cathartics frequently repeated. He recommends the local application of iodine and

iodide of potassium, with glycerine to the cervix, but has no faith whatever in the value of the internal administration of these remedies, having never been able to discover any change in the affected organ after long continued use of them. He has not tried vesication of the cervix, and is not favourable to the use of either caustic potash, Vienna paste, or the actual cautery. In cases having more the character of passive congestion the astringents come into use. He has used, of late years, subcutaneous injections of ergot, and has seen excellent results from this remedy.

There is one point in connection with this form of disease of the uterus, which is of the utmost importance: it is the differential diagnosis between it and malignant disease. The author freely admits the impossibility of distinguishing the graver affection, in its early stages, from the more benign.

... "We will openly acknowledge that no perfectly reliable diagnostic sign is known to us. The age of the patient deserves consideration, the possibly to be discovered cause of the ailment, also its former course and its apparent influence upon the general organism. If, on some sides, the unusual hardness of the vaginal portion and the lower segment of the body is recognized as a tolerably reliable criterion of cancerous infiltration, we cannot assent to this view, because this condition has occurred to us in several cases in which the disease proved by its further course to be undoubtedly a simple induration. The size and form of the enlarged cervix, its smooth or uneven surface, the movability or immovability of the uterus, the kind and position of the pain, the character of the bloody and mucous discharges from the vagina—in short, all the various differential signs and symptoms of the older and later writers as to the benign or malignant character of enlargements of the uterus—have, in and of themselves, no high diagnostic value. They may, taken all together, and with careful consideration of all the peculiarities of the particular case, give foundation to a greater or less probability in one or the other direction, but long observation of the objective changes in the cervix can alone give full security."

Turning to the chapter upon cancer of the uterus, we find that the author enters very fully into the consideration of diagnosis, devoting about twelve pages to the subject, much of this space being occupied with a full commentary upon Becquerel's parallel tables of symptoms. We find here the same candid confession of inability to make a differential diagnosis between chronic areolar hyperplasia, and malignant disease. Indeed, in speaking of the mode of origin of the 108 cases which occurred under his observation, he says that "in 18 we treated a uterine affection, which we held to be nothing else than a chronic metritis, part with and part without ulceration."

"A reliable judgment as to the cancerous nature of a non-ulcerated enlargement of the neck of the uterus can only be rendered either by anatomical investigation, or, chemically, by long observation of the course and particularly of the beginning of the well-known metamorphoses of cancerous tumours." . . . "We openly confess that we have been very often tempted to believe enlargements and indurations of the cervix to be cancerous, yes, even that we have repeatedly declared such a diagnosis to the friends of the patient, without our opinion having found its indorsement in the further course of the disease."

"In the differential diagnosis of benign or malignant enlargement of the cervix, we lay great weight upon the condition of the mucous surface, whether it is intact or the seat of a more or less extensive papillary erosion or ulceration. Where this is lacking, be there present more or less of the above-mentioned symptoms given by Becquerel in favour of cancerous induration, we are always more inclined to look upon the enlargement as a simple hyperplasia."

Recently Spiegelberg has investigated the diagnosis of the early stage of carcinomatous disease, and has laid stress upon three points upon which to base a decision : 1. The much more considerable hardness and resistance of the cancerous deposit in comparison with the consistence of hyperplasia. 2. The immovability and close union of the mucous membrane covering a cancerous degeneration, which is not the case in hyperplastic enlargement and induration. 3. The fact that while the latter, under the pressure of a sponge-tent, dilates and becomes softer and more spongy, the carcinomatous cervix remains hard, unchanged in consistence, and undilated. Each of these points receives attention. The first two are declared unreliable from the author's personal observation and experience. In regard to the third, which not long since went the rounds of our medical journals, he says :—

"In regard to the effects of the sponge-tents upon the cervix indurated from malignant deposit, we have no personal experience, and it appears from Spiegelberg's interesting investigations that he had really only twice the opportunity of practically testing his theoretical view by a microscopical examination. The confirmation or refutation of the same must therefore be referred to the future. In the mean time we cannot avoid remarking that Spiegelberg himself confesses that by the action of the tent the destruction of the neoplasm, the ulceration of the cancer, is hastened, whereby, as is readily understood, great doubt is thrown on the reliability of this measure as a simple means of diagnosis ; and as he also says that no injury is done thereby, because extirpation should immediately follow, it is certainly proper to ask whether, by this injurious effect of the tent, the results of the operation may not be affected."

While upon the subject of cancer of the uterus, we cannot avoid noticing one point in the etiology. The author expresses the conviction that venereal excess is one of the causes of this disease. Of the 108 cases observed by him, 15 had suffered, upon their own or their husband's testimony, from a sexual desire beyond possibility of satisfaction. That prostitutes comparatively seldom suffer from the disease (there were only three among his cases), he explains by saying that, with them, coition is not generally accompanied by much feeling, and it is not frequent intercourse alone which causes the disease, but extraordinary excitement and sexual pleasure. To this view we are not prepared to assent. We would not for a moment think of placing our experience against his, and our opinion may be of little value, but from several cases which have fallen under our observation, in which unusual sexual appetite has been prominent, we have been led to place this in the symptomatology, rather than the etiology of the disease ; in other words, we think the abnormal sexual desire a result of the pathological process rather than the cause of it. Our opinion is based upon the fact that the unusual sexual appetite appeared but a comparatively short time previous to the presence of the disease being ascertained, and had not been a characteristic of the earlier periods of life.

In the chapter on dysmenorrhœa we find considerable space devoted to the consideration of division of the cervix, an operation to which he is not at all partial, as may be supposed from the tenor of his preface. He animadverts on the frequency with which Sims resorts to it, and also expresses doubts of it being ever necessary.

"To the honour of German science we can say that such kind of extravagances do not find so easy an adoption here as in England and America, where, besides, some of the most renowned surgeons and gynecologists have arrayed themselves in opposition to a procedure to which, in some rare cases,

a certain justification cannot be denied; but the abuse of which marks rather a retrograde movement than an advance of our department."

In the first edition of this work the subject of inflammation of the structures in the neighbourhood of the uterus was disposed of within two pages; now it occupies twenty-four, a space more in accordance with the great practical importance of the subject, and the change serving somewhat to mark the advance made in this direction. The author treats of pelvic cellulitis, pelvic peritonitis, and pelvic abscess in a single chapter, and without subdivisions. He declares it impossible to distinguish, in the early stages, a metritis or an oophoritis from an inflammation of the membrane surrounding the organs, but points out how the membranous may generally be distinguished from the cellular affection, laying great stress upon the time at which the exudation is to be discovered after the attack begins; if a tumour is to be felt in from twelve to twenty-four hours, the disease is phlegmonous in character. He expresses the conviction that these peritoneal and cellular inflammations are always secondary affections, depending upon some previously existing disease of the uterus, ovaries, or tubes, herein agreeing with Matthews Duncan, although he does not mention that author's name. He alludes to the far greater frequency of the exudations upon the left side, but without giving any statistics, and explains the fact by their puerperal origin, the greater frequency of the first position of the child, and consequent greater injury to the tissues on the left side of the pelvis. He calls especial attention to the frequent occurrence of a latent form of the disease—the true explanation of an unsatisfactory convalescence from labour—being only found weeks after the event by a physical exploration. And in the symptomatology of the disease the following is well worthy of remembrance:—

"It appears to us also deserving of mention, that the exudation, pressing upon the nerves passing through the cavity of the pelvis, not rarely causes disturbance of motor power, contractions, and parietic and paralytic symptoms in the lower extremities, the cause of which is not seldom sought for in altogether other directions, and, of course, cannot be recognized so long as a careful internal examination of the pelvic organs is omitted from the investigation."

He calls attention to liability of deception as to the point of opening of a pelvic abscess in the vagina, the examiner feeling certain that it will break out at a given point, when the pus all at once appears elsewhere.

"This apparent fluctuation perceived through the vaginal wall owes its origin not to the superficial location of the purulent collection, but to a serous saturation, an inflammatory œdema, of the vaginal wall and of the neighbouring capsular layer of the exudation, which gives to the finger an obscure sensation of fluctuation."

The author, except in special cases, allows the natural opening of pelvic abscesses.

The extremely chronic cause of some of the cases is described, and the importance of a knowledge of the fact to the physician duly impressed; he who is fully aware of it will stay his hand as to any operative interference with the pelvic organs so long as a trace of the affection remains, be it years after its origin, and guard his tongue as to prognosis, for the patient is always liable to a relapse which may have even a fatal termination. In those cases in which for a long time there had been no change, nothing apparently being left but hard tumour of connective tissue resulting from the exudation and producing symptoms only mechanically by

pressure on and dislocations of neighbouring organs, we have no guarantee of continued quiet.

"For, finally, it is not to be forgotten, that these apparently wholly solid tumours, not so very seldom have encapsulated within them larger or smaller collections of pus, whence it may happen that the contents of the tumour, after perhaps years of quietude, breaks a way out and so brings on all the dangers of a pelvic abscess."

Looking carefully through the section devoted to fibroids of the uterus, we find nothing worthy of especial notice. The author bears strong testimony to the value of Hildebrandt's hypodermic injection of ergot as a measure of treatment. When it comes to the operative treatment of these growths, a field in which of late so many brilliant advances have been made and especially in our own country, his conservative tendencies are so strongly expressed that we cannot forbear quoting, if only to show the contrast between his doctrines and those current with us. First as to the removal of these tumours by abdominal section. He credits Kæberle with resuscitating this "long-forgotten operation," and gives his results as five operations with three deaths; he then gives statistics as collected by Kæberle, 42 such operations with eight cures and 34 deaths, and mentions no other name in connection with the operation; and then says:—

"We, for our part, see in such foolhardy interferences no advance of surgery, and cherish the hope that the example of the French and English schools in this respect will never find imitators upon German soil."

Next, as to the extirpation of these tumours by the vagina, he says:—

"It appears only to be justified in the rarest cases; according to our opinion only when the growth is attached to the neck of the uterus, and projects freely into the vagina. We would not readily undertake the removal of submucous fibro-myomata projecting within the cavity of the uterus, as has been proposed by Amussat, Kiwisch, Hutchinson, Routh, Baker Brown, and others, although it was once done at our gynæcological clinic by Dr. Schmidt with surprisingly good results, because we hold this operation to be not only extremely venture-some and dangerous, but because also we are acquainted with no means whereby we may learn beforehand the possibility of completing the undertaking."

It is not at all improbable that a future edition of the work may change all this, for, turning now to the subject of ovariectomy, we find the greatest possible change of opinion in regard to the operation from that expressed in the first edition.

"We hold the extirpation of ovarian tumours to be a surgical adventure, which, when it succeeds, must be thankfully glorified by the patient, and gaped at by the public."

These are the terms used in regard to ovariectomy only eighteen years ago! The author quotes this now and makes the *amende honorable*; the testimony of thoroughly reliable men, and the brilliant results obtained, have transformed him from a condemner to a defender of the operation. For the slow advance of ovariectomy in Germany, he pleads the influence of Simon's statistics, published in 1860, of all the operations performed up to that time, viz., 64, of which only 12 were really cured. He further pleads that an evil influence was exerted by the failures of rash, inexperienced, and unskilful men, who, deceived by the apparent ease of the operation in simple cases, attempted an undertaking which requires the highest qualities on the part of the operator, and that a portion of the ill-success arose from want of due attention, both to the various steps of the opera-

tion and to the after-treatment, which, on the part of German surgeons, were "in part unknown and in part neglected."

So far as ovariectomy itself is concerned there is little here to detain us. The author follows Kæberle closely as to the details, and is very brief, referring his readers for further particulars to the works of that author and to those of Spencer Wells and Baker Brown, acknowledging that he has not space for a subject the literature of which has so increased within ten years that it would alone fill a small library.

We looked with interest to the diagnosis of ovarian tumours upon microscopical evidence, hoping to find some testimony as to the presence or absence of an ovarian cell pathognomonic of the disease. The author follows Waldeyer closely in this branch of the subject, lays great stress upon the presence of paralbumin in the fluid, and as to cells looks upon those of cylindrical epithelial character as diagnostic, but gives no particular kind of cell as of importance.

Puncture of ovarian cysts through the vagina is well known to be a favourite operation of the author. In the present edition he has not modified his views as to the procedure, still thinking it the most preferable plan of procedure, both as to danger and as to probability of cure, but admits that the cases to which it is adapted are comparatively few. He still uses the same instruments and directs the same mode of operating as formerly. His statistics are as follows:—

"We have performed paracentesis through the roof of the vagina 23 times, and consider 14 of the cases to be entirely cured; in 5 refilling of the sac took place within a few weeks, 3 withdrew from our observation, and 1 died of typhus two months after the operation, and as no autopsy was permitted we can form no opinion as to the success in this case."

Limited as is the number of subjects we have touched upon, it is sufficient to afford an opportunity to judge of the author's style and the general tenor of his opinions upon some of the most important subjects connected with gynæcology.

To the firmness of his convictions, to his undoubted honesty, and to the clinical basis upon which his opinions are founded, we have already alluded. Looking at the work as a whole, to its methodical arrangement, to its completeness as to the various branches of the subject, we find it excellent. Still, we cannot fail to note omissions which are not only numerous and important, but, for a writer occupying his position, surprising. Thus, with a general bibliography at the beginning of the volume, and a special one at the head of each chapter, we have no notice of so important a treatise as Raciborski's on menstruation, or of Matthews Duncan's on pelvic inflammations, or Atlee's on ovariectomy. There is no mention of what has been done in removing fibroid tumours of the uterus by Pean, or by Sims and others of this country, nor of the brilliant results obtained here in the reduction of long-standing cases of inverted uterus. Nothing is said of the diagnosis of simple cysts of the broad ligaments by physical examination of their contents, nor of the spontaneous coagulability of the fluid of fibro-cystic tumour of the uterus, a fact which is the more remarkable since his countryman, Spiegelberg, has called particular attention to it.¹ Far more important still, we have not succeeded in finding any notice of the aspirator, one of the most useful recent additions to our means of

¹ See Monthly Abstract of Medical Science, Jan. 1875; from Archiv für Gynæc.: vi. 3. 74.

diagnosis, if not of treatment. Finally, our examination of this work leads us to the same conclusion reached from a late personal visit to some of the chief celebrities of Europe, both men and institutions, that in all that relates to gynecology and its practice, our own country will bear comparison with any other, either as to the extent to which the subject is cultivated by the profession generally, the text-books and treatises it has produced, or the substantial advances it has made in the subject.

J. C. R.

ART. XXV.—*Studies in the Facial Region.* By HARRISON ALLEN, M.D., Professor of Anatomy and Surgery in the Philadelphia Dental College. Illustrated with fifty-six wood-cuts. (Reprinted from "The Dental Cosmos.") 8vo. pp. 117. Philadelphia: J. B. Lippincott & Co., 1875.

A NEW work on regional anatomy in our own language is both rare and welcome, even though, as in the *Studies in the Facial Region*, only a limited portion of the body is brought under consideration. The lectures that form the basis of the work under review were delivered to dental students, yet its author has not confined himself to the parts with which alone practitioners of dentistry are supposed to deal, but has taken up all the regions of the face, viz., "the region of expression, of the temple and angle of the lower jaw, of the ear, the upper and lower jaws, the nose, the mouth, the tongue, the naso-pharynx and palate, the sphenomaxillary and supra-hyoid spaces." Each subdivision is made according to "relation of function," applying the physiological law that "areas supplied by branches of the same nerve are co-associated in function."

The anatomy of these various districts is given thoroughly and minutely (perhaps at times too minutely for the benefit of the majority of medical students). Some few changes in the nomenclature ordinarily employed have been made. Praying "that the time may soon come when we can sweep away such pedantic rubbish from anatomy," Dr. Allen would discard the old names *levator labii superioris* and *levator labii superioris alæque nasi*, and substitute Henle's name for the two, *quadratus labii superioris*, holding that "no conscientious teacher can permit himself to employ two names where one does as good service." This is certainly true enough, and it is equally true that the anatomical nomenclature is full of "pedantic rubbish;" but which name conveys to a student's mind the best and clearest idea of location and office, "*square muscle of the upper lip*" or "*elevator of the upper lip*" and "*of the upper lip and ala of the nose*." In this instance, "we like what he says, but prefer the old way." The region between the masseter and depressor anguli oris our author denominates *porta*, to which the only objection is that it adds one more to the multitude of names that the student must fix in mind. Instead of *posterior naris*, preference is declared for the term *choana* "to express the parts as seen in the living subject." To the "orifice of communication between the vestibules and the true oral chamber, the very appropriate name of "*præ-coronoid space*" is given. The term *fauces* is nowhere used, it being held that nothing but confusion can arise from the use of a term