antecedent facts, however much skill we may possess in interpreting the phenomena of Nature and her complex derangements. Some physicians may have the gift of divination, but so rare is this that the only safe course is to be armed by all attainable, all relevant, incidents. Then and then only, can we draw rational inferences or make exact deductions.

In the conduct of any large business one of the primary requisites is a knowledge of all obtainable collateral facts. No business man will blame an employé for errors committed if the cause is clearly absence of information essential to the understanding of the problem. In every well-regulated business office it is customary to devote a large part of the office force to the securing, sifting, systematizing of facts, direct and indirect, and placing them ready to hand. Success is recognized to follow in proportion as this data is adequate, and wisdom is exhibited in its prompt utilization. The laity criticize us sharply and justly for our lack of consistency in views on related subjects, diversities in belief as to causes, phenomena, progress of human derangements; above all, for seeming contrariness in selection of remedies, and guesswork as to finalities.

Yet it is by no means all our fault that medicine can still be termed inexact. Despite centuries of effort, we still lack many fundamental facts. The public should be made to know that research workers in medicine are estimated by experts in other scientific lines to have contributed more to the sum total of human knowledge than the aggregate of all the other exact sciences.

The chief obstacle in solving clinical problems lies in the absence of adequate case histories.

To remedy this, I would propose the very general employment of family case-history books. These should be simple yet complete in their arrangement, with clear, exact directions for use by parents, physicians and others. Physicians should be able to buy them cheaply in quantity and supply them to all the families they attend gratis, or for a small sum. If this were done, or wherever done, there would be at least a more or less satisfactory record kept of happenings, peculiarities, data on growth, development (mental and physical), accounts of ailments, illnesses, in sequence. When the medical attendant is confronted by the problem of an ailment he would be able, by consulting this record, to obtain invaluable light on many otherwise obscure points. To depend on the memory of parents, or the records of other physicians, is far from satisfactory. It would not be long before all intelligent people would adopt the custom. The records would thus be entirely private. When a family transfers its confidence from one physician to another, it is often most difficult to secure cordial cooperation and comparison of notes. Whenever a specialist is needed he may desire information of a sort not to be had at all. Such a family record could be so devised, by the help of specialists in different lines, as to supply much thus required.

In the taking of histories of children the burden will fall naturally on the mother or other near relatives. It can be best done coincident with the occurrence of notable circumstances, but is most feasible while the facts are fresh in the memory. Invaluable records have been made by parents which furnish data for child-study, comparative psychology, developmental stages, and many similar researches.

The family physician is the one whose duty it is to oversee the members of a family whenever, in his judgment, there is necessity, to watch growth, to confer on subjects consonant with his official connection. Whenever he visits the family and makes observations, the book should be submitted to him to make notes.

During severe or protracted illness, when a trained nurse is employed, the records should be kept in this book. In the interest of exactitude, there should be certain pages of blank anatomic diagrams, such as are used in hospitals and by careful clinicians, on which can be marked the site of lesions of chest, of heart, or other parts.

Details of form and character need not be given here. I consulted a publisher as to the wisdom of issuing some such systematic inexpensive case-record book. He is of the opin-

ion that "it might not pay." My purpose is to beg an expression of opinion from as many as possible and then to form practical conclusions. Would not such data prove of high value to physician, families and perhaps even to historians as well as lawyers? Postal card replies will suffice.

J. MADISON TAYLOR.

Milk Supervision and Certification by County Societies.

JACKSON, MICH., Aug. 28, 1907.

To the Editor:—Enclosed find our scheme for obtaining pure milk, which is self-explanatory. As you will notice, our plan is somewhat different from the usual one of certifying the product from only one dairy. Any dairyman who will comply with our rules and furnish a product meeting standard requirements as to bacterial content and food elements may have our certification. The scheme has already secured good results.

C. G. PARNALL.

[The work to which Dr. Parnall calls attention is being done through a committee appointed by the Jackson County (Mich.) Medical Society. A circular and a card of application for certification are sent to the dairymen. The former embodies the most important recommendations and measures for producing clean milk, requiring the dairyman to agree to inspection by the committee and to abide by its rules and regulations. Any case of communicable disease occurring in the household of any person engaged in handling the milk or milk utensils must be reported at once to the committee. The rules also require cleanliness of the cows and stables; the latter are to be white-washed at least once a year. The water supply must be uncontaminated and a separate, clean milk house provided, which must be used for no other purpose. The milkers must not have any communicable disease, must wash their hands before each milking, and the utensils must be kept scrupulously clean. The milk from diseased cows must not be shipped; the milk must be strained in the milk house only; it must be cooled below 55 degrees, and no preservative, coloring or other adulteration is to be permitted. Then follow the detailed recommendations of the health department of New York City as suggestions. These suggestions treat the subject of production of clean milk with considerable detail and must certainly be of great value to dairymen who wish to improve the quality of their milk to meet the demands of sanitary science. The application card binds the dairyman to permit inspection and the taking of reasonable samples and to abide by the rules of the committee. This work is excellent and ought to be imitated by many other county societies. It is such an enterprise as this that compels recognition by the public.]

Miscellany

Arabian Contributions to Medicine.—In a letter to the *Boston Medical and Surgical Journal*, Dr. E. T. Williams, Roxbury, Mass., refers to Dr. Osler's recent statement that the physicians of the Arabian school made no solid contributions to anatomy or physiology, and says that while this is undoubtedly true, yet the Arabians made valuable contributions to science. Geber, in the eighth century, discovered arsenious acid and corrosive sublimate. Albucasis, in the twelfth century, discovered alcohol and the art of distillation. Alhazan of Cairo, in the eleventh century, wrote a valuable treatise on optics and described the properties of lenses. Rhazes of Bagdad, in the tenth century, gave the first accurate description of smallpox; Avicenna, in the eleventh century, described malignant pustule, and Avenzoar of Seville, in the twelfth century, gave a description of the itch. We owe to the Arabians the methodical use of opium as a remedy, which, though used by Dioscorides and some of the Grecians to a certain extent, was apparently unknown to the Galenists. They also used mercury, which was first made known to the Europeans as a medicine by the Moors and Saracens, was adopted by Guy de Chauliac and Paracelsus and formed the chief ingredient of the prescription sold by Barbarossa, the corsair of Mitylene, to Francis I to cure his pox. We can not, says Dr. Williams, date a letter without the Arabic nu-