physicians have the right to know the composition of all remedies used by them it is their duty to refrain from using articles for which the formulas are not given. The society also commended the work of the *Ladies' Home Journal* and *Collier's Weekly* in exposing "patent medicines."

Similar resolutions were passed by the Crawford County (Ill.) Medical Society, the Allamakee County (Iowa) Medical Association, the Santa Barbara County (Cal.) Medical Society, the Atlantic County (N. J.) Medical Society, and the New Castle County (Del.) Medical Society.

The Shelby County (Ala.) Medical Society, at a meeting held January 9, passed resolutions approving the work of THE JOURNAL and of the Council on Pharmacy and Chemistry in exposing secret remedies, and also the work of the *Ladies' Home Journal* and *Collier's Weekly*. In addition, the members of the society pledged themselves not to prescribe any preparation of which the formula and proportions of the ingredients are not well known and substantiated by well-accepted medical authorities. The society also condemned unqualifiedly all religious publications which publish advertisements of deleterious "patent" preparations, or sure cures for cancer, dropsy, tuberculosis or Bright's disease.

The Utah County (Utah) Medical Society endorsed the action of the American Medical Association and instructed the secretary to notify the Utah State Medical Association, the American Medical Association and the Utah State Pharmaceutical Association to that effect and also to advise these bodies that the society has sent a petition to Congress in support of Senator Heyburn's pure food bill.

One Illustration of the Danger of Using a Nostrum.

In the January number of the *Medical World* is an illustration of what can happen, and often does happen, when a physician prescribes a secret preparation. Some one contributes an article on the treatment of pneumonia, but the editor generously suppresses the name of the author. The latter claims to have practiced thirty years, "hoping all that time that I should some time be a doctor; but I am yet a student." For "pain or stitch in side," he gives a hypodermic of morphia, and adds:

"This gives perfect ease with deep breathing. At this stage I am not afraid of acetanilid. I generally carry a preparation made as follows:

"R. Acetanilid ʒi

"Soda bicarb.

"Bromo seltzer, aa. ʒss

"M. Triturate thoroughly. Dose, 5 gr. to 15 gr.

"Follow the hypodermic with a dose of the above mixture. In from 20 to 60 minutes the patient begins to complain, 'Oh, I am so hot;' A few minutes later a colliquative sweat sets in. Your patient is now comfortable."

The last remark is not to be wondered at, and it would not be strange if the patient remained "comfortable" for a long time. As the editor of the *Medical World* comments, "It is no wonder that his patients become cyanosed and suffer from drenching sweats." Here is a doctor mixing this nostrum, bromo-seltzer, a principal ingredient of which is acetanilid, with acetanilid. He is a student, he says, and we hope that he will prove to be one to the extent at least of learning not to prescribe anything unless he knows exactly what he is prescribing.

A Pertinent Question.

The *Medical World*, commenting on one of the *Collier's* articles on nostrums, concludes with this pertinent question:

"How can the editor of any medical journal read the expose of antikamnia above mentioned and print the advertisement of antikamnia in his advertising pages? The profession should ask every medical editor if he has read the article above referred to, and then ask why he carries the antikamnia advertisement. Will you write to the editors of all the medical journals you take about this matter?"

But why not ask the same question regarding ammonol, salcodeia (Bell) and phenalgin? They are all in the same category. It is not only because it is indirectly advertised to the public that antikamnia should be condemned, but because it is a dangerous nostrum that has been foisted on our profession on false claims. The other acetanilid mixtures we mention should be refused recognition for the same reasons.

A Pharmaceutical Secret Which Should Not be Lost.

Dr. Gregory Costigan, New York City, writes, under date of January 21, as follows:

"I have been carefully reading and enthusiastically approving your articles on the nostrum evil, and have been impressed more than usual on the existence of quack advertising in medical journals as set forth in last paragraph and quotation on page 206, bottom of first column, of your issue of Jan. 20, 1906.

"In *Merck's Archives*, page 11, we are told in an advertisement on 'Phenalgin' that it 'is a compound of peculiar character which can not be extemporaneously made from powdered drug' and 'our process of manufacturing tablets is coincident with the manufacture of Phenalgin and is the result of a long series of careful experiments by which we are able to produce tablets of Phenalgin in a friable condition without losing any of its volatile constituents or undergoing chemical changes from heat or moisture'!! Inasmuch as Phenalgin tablets are not covered with a waterproof coating I think this is a remarkable statement to make, and the manufacturing of a drug coincident with the manufacture of a tablet must be a very remarkable performance especially because it 'retains the full therapeutic value of the drug unimpaired' while the advertisement asserts that no other manufacturer is cognizant of this wonderful method. This ad. is for the perusal of physicians only. The Etna Chemical Company owes it to the medical and pharmaceutical world not to let this secret die with the company's dissolution. It owes it as a duty to the coming generations of science immediately to jot down the full data of this wonderful performance, to put it away in an age-proof safe and not to allow it to be lost to humanity as were a great many other arts that were well known to the ancients. Let them keep it secret now and profit by it, but do not let it be lost to posterity."

Correspondence

The Index Medicus.

WASHINGTON, D. C., Jan. 15, 1906.

To the Editor:—The complimentary dinner given in honor of the approaching 83d birthday, on March 6, 1906, of one of the founders and the principal editor of the *Index Medicus*, Dr. Robert Fletcher, has naturally directed attention to that publication.

The *Index Medicus* is a monthly publication, issued under the auspices of the Carnegie Institution of Washington, D. C. It is edited by Dr. Robert Fletcher and Dr. Fielding Garrison, of the Library of the Surgeon-General's Office. It is just what its name indicates, a medical index, or subject and author catalogue of all the current medical literature of the world of the preceding month.

It is compiled, through the courtesy of Dr. Robert M. O'Reilly, Surgeon-General, U. S. Army, and Major Walter McCaw, Assistant Surgeon-General and Librarian of the Library of the Surgeon-General's Office, from the cards prepared for the "Index Catalogue of the Library," the cards being loaned for that purpose. The "Index Catalogue" is published in progressive volumes, one volume a year, covering one or more letters of the alphabet, according to the number of titles that can be comprised in the prescribed 1,000 pages of the volume.

The *Index Medicus* was founded by Drs. J. S. Billings and Robert Fletcher in 1879, who were its editors until Dr. Billings retired from the Medical Department of the Army. From 1879 to 1884 it was published by F. Leypold, of New York. It then announced its suspension for want of sufficient support, but, with the beginning of 1885, George S. Davis, of Detroit, took up the publication and continued it until 1895. From May, 1895, until April, 1899, the publication was issued by the editors, when it suspended publication. Jan. 1, 1903, the Carnegie Institution undertook the responsibility of publication.

Although Dr. Fletcher was in his 81st year when the Carnegie Institution undertook the publication, and was reluctant again to take up the editorship, he yielded to the urgent persuasions of his many medical friends and again resumed the editorial chair, assisted by Dr. Fielding Garrison, who has been for some years associated with Dr. Fletcher in the compilation of the "Index Catalogue."

The subscription price of the *Index Medicus* was originally \$5 per year, but at this price the publishers lost money. It was then raised to \$10, but this was not sufficient to pay the enormous cost of printing, and \$25 a year was subscribed by one or two hundred enthusiastic medical writers, but even this was not sufficient to meet the growing expense.

It may readily be asked why so valuable a publication was not self-supporting. The answer is that in the entire medical profession there are only a comparative few who are interested to any extent in medical research, but more particularly to the fact to those only who have easy access to large medical libraries or who could afford to come to Washington and use the Library of the Surgeon-General's Office would the *Index* be of much service, as it gives only the titles of books and journal articles and the source from which they are taken. But to those who are engaged in medical research, and wish to keep in touch with the very latest and best thought and progress of medicine and surgery it is considered invaluable and indispensable.

THE INDEX CATALOGUE.

The "Index Catalogue of the Library of the Surgeon-General's Office," which forms the basis of *Index Medicus*, is the most perfect and complete author and subject index ever published.

The first series of this magnificent government publication, comprising 16 large quarto volumes, from A to Z, began in 1880, and ended in 1895. In 1896 letter A of the second series was begun, and last fall vol. x, containing only part of letter M, was issued. Only one volume is published each year.

The publication contains an author and subject index to about three-fourths of all the medical and surgical literature of the world for all time, and about 90 per cent. of the literature for the past twenty years. It differs from the *Index Medicus* in that it contains everything, old or new, to be found in this great national library, while the *Index Medicus* only contains the new and current literature. A word or two will make it clear as to why the *Index Medicus* was deemed necessary.

As the "Index Catalogue" is published progressively, one or two letters of the alphabet at a time, it is manifestly obvious that it could not keep up with the current literature. For example, a physician who wishes to write a paper or examine into the literature of tuberculosis for the past ten or twelve years can get his references from the *Index Medicus*, whereas he would have to wait until about the year 1909 for the volume of the "Index Catalogue" containing that subject, or else come to Washington and consult the card catalogue. The *Index Medicus* obviates that difficulty, and it was for this reason it was begun as a private undertaking. But this would have been an impossibility had it not been, as I have stated, for the courtesy of the Surgeon-General in permitting the publishers to have access to the cards which were daily being indexed for the "Index Catalogue."

The classification of subjects in the *Index Medicus* necessarily differs very materially from that of the "Index Catalogue," which is more minute and covers a broader range, yet it is a most comprehensive classification, and to many of the users of both the former is very satisfactory and easily understood.

To Dr. Robert Fletcher, principal assistant librarian and chief editor of the *Index Medicus* during its entire existence, is due the credit of this most perfect work, but it would be difficult for any one to comprehend fully the vast amount of painstaking labor involved. Night after night and month after month during these 23 years he has burned the midnight oil in order that the medical profession should have their beloved index in all its perfectness on the day of publication. Had he not been the most methodical and systematic worker engaged in any literary work, he would long ago have broken down under the great strain. Not the slightest detail of arrangement or classification or typographical execution but what came under his rigid scrutiny. It was a peculiar task, requiring much thought and a perfect encyclopedic knowledge of medical nomenclature, a faithful attention to detail and unceasing toil and vigilance. The last revised proof sheets of the index, as they left his hands each month for the office of publication, formed, in fact, a miniature monthly edition of the

great "Index Catalogue," which has been and still is the wonder of the world. It brought to its few appreciative subscribers a perfectly classified index of the original writings of all the medical men of the world on every subject in medicine and surgery for the past month, and at the end of each volume it contained an author and subject index to every book and journal title, which of itself was a marvel of painstaking labor. The author index was particularly valuable for reference, furnishing, as it did, a complete bibliography of the writings of all medical men, whether of a book or a journal article.

HARRY O. HALL,

In Charge of Reading Room,
Library Surgeon-General's Office.

Medical Student Reputations.

BUFFALO, N. Y., Jan. 13, 1906.

To the Editor:—Alluding to your editorial in THE JOURNAL, January 13, on "Medical Student Reputations," allow me to point out that the whole trouble as to student rowdiness is of comparatively recent date and practically synchronous with the development of social life analogous to that at colleges. A small boy apologized for his too demonstrative puppy that he didn't know he was a dog, he thought he was folks. Exactly the same trouble ails our too demonstrative medical, law, pharmaceutical, veterinary and other professional students and, ridiculous as it may seem, even callow, ignorant boys making up deficiencies of arithmetic and learning bookkeeping and stenography at business "colleges."

All these boys are impressed with the notion that they are college students. If they have to spend their time on less ornamental and more immediately practical things than Latin and Greek and calculus and geology, they can, nevertheless, parade in their nightshirts or break in the doors of the college, or sing smutty songs about the faculty at a theater party.

Now, I haven't a word to say in extenuation of similar doings by real college students and I would not like to admit that the man who is preparing for lifework in a profession, is not engaged in a highly reputable and honorable occupation. There is not even any objection to calling a quiz society by Greek letters or having a sofa pillow with college colors on it, or maintaining a football team or in other reasonable ways copying at professional schools, the social life at colleges.

But, when in the attempt to make a "college" man of himself, the professional student indulges in foolish and destructive acts, the time has come not to appeal to his sense of honor or maturity, or to his realization of the dignity of his future profession, but to get at the root of his self-deception. Snobbishly if need be, plainly in any case, set it before him that he thinks he is folks when he is just plain dog. Let him understand that a professional school is not a college and that his lawless acts will not be covered by the mantle of glamor and social prestige which, rightly or wrongly, sometimes cover similar lawless acts by the genuine article.

A. L. BENEDICT, M.D.

A Simple Method of Making a Blood Count.

BALTIMORE, Jan. 16, 1906.

To the Editor:—I have a clinical suggestion to offer your readers which I have found valuable. It is so simple that it may be a very common procedure, but if so I am not aware of the fact. In the Thoma-Zeiss blood-counting apparatus the lines on the counting scale which may be seen plainly under the microscope when there is no blood on the slide do not always show out clearly when the drop of blood has been covered with the cover slip and the slide made ready for the examination. In accurate work, when a large number of fields are counted, a great deal of time is lost, in the aggregate, in getting the proper portion of the slide under the lens, especially when the higher powers are used. For some time I have used a method which, while very simple, is not mentioned in textbooks, and is not only a time saver, but also renders the blood count more accurate, as less manipulation of the slide is