history is not clear. The first was a shoemaker, who acquired an intoxication from holding pewter-coated nails in his mouth. A cigarmaker, who rolled cigars on a pewter-covered board, and held the knifs with which he cut them in his mouth between whites, had typical plumbism. The third case was that of a diamond-worker, who, for fifteen years, was employed in fixing the small diamonds in a warm lead mass; the fingers were kept moist with saliva. This patient left the diamond factory, and five months later was attacked with acute lead-poisoning. The case is interesting on account of the latency of this poison. Pel points out the great variation in the susceptibility of different individuals to plumbism. The cases reported must have been poisoned with very small quantities.

The Florence Reaction.—POSNER (*Berliner klinische Wochenschrift*, 1897, No. 28) describes the crystals obtained by the Florence test for semen. He adds an iodine-rich solution of iodine and potassium iodide to fresh semen or to a watery extract of the stains, and obtains numerous dark-brown crystals of various forms—rhombic tablets, fine needles. These crystals have a great value for forensic medicine. The reaction does not depend upon the presence of spermatozoa in the fluid. It may be obtained from the seminal fluid in cases of complete azoospermia as well as from the secretion of the prostate. The crystals must come from some chemical body, and the idea that they might come from spermin seems to be borne out by the fact that the addition of the reagent to a solution of spermin phosphate gives typical Florence crystals. Extracts from spermin-containing organs (ovary) gave also a positive result.

Richter has tested many of the other substances found in semen. One of the decomposition-products of lecithin (cholin) yielded typical crystals. The Florence reaction should be of aid in doubtful cases, but cannot be certainly relied upon, as it is given by other substances than semen.

The New Tuberculin.—SCHULTZE (*Deutsche medicinische Wochenschrift*, 1897, No. 28) has tried to limit his cases, as recommended by Koch, to those whose temperature has never been over 38° C. He has subjected nine such patients to treatment for periods varying from one to two months. The treatment has not had the bad effects that sometimes come from the old tuberculin. During the treatment one case acquired a tuberculous ulcer of the larynx, one a severe diarrhoea, probably tuberculous. Four remained unchanged. In one a pleurisy was improved. The last two improved. It is too early to say how many of the changes in the condition of these patients was due to the tuberculin.

Bussinius reports from B. Fränkel's clinic the results of treating nineteen patients with the T. B. tuberculin. In fifteen of the cases the cure was complete—that is, they began with $\frac{1}{16}$ mg. and increased to 20 mg. The author thinks the dose should be increased more gradually than by the method of doubling it each time. Eight of the patients gained in weight and five lost. There was quite a marked tendency to reaction after the injection, different samples of the tuberculin varying greatly in this respect. Neither blood nor albumin was ever observed in the urine. Locally, there were no abscesses, but several times painful infiltrations. The cough improved

twice, but no changes in dull areas could be made out. No marked changes were observed in the pharyngeal or laryngeal cases. There was a slight tendency to diminution of the swelling. Three cases of lupus seem to have been considerably improved.

SURGERY.

UNDER THE CHARGE OF

J. WILLIAM WHITE, M.D.,

PROFESSOR OF CLINICAL SURGERY IN THE UNIVERSITY OF PENNSYLVANIA; SURGEON TO THE
UNIVERSITY AND PHILADELPHIA HOSPITALS;

ASSISTED BY

ALFRED C. WOON, M.D.,

AND

C. L. LEONARD, M.D.,

INSTRUCTOR IN CLINICAL SURGERY, UNIVERSITY
OF PENNSYLVANIA; ASSISTANT SURGEON,
UNIVERSITY HOSPITAL.

ASSISTANT INSTRUCTOR IN CLINICAL SUR-
GERY IN THE UNIVERSITY OF
PENNSYLVANIA.

Congenital Blood Cyst of the Neck and Axilla.—KOCZANOWSKY (*Deut. Zeit. für Chir.*, Band xlv. Heft 3 u. 4) reports an interesting case of an apparently congenital cystic tumor, which occupied the left supraclavicular and infraclavicular areas in a four-months' old child. Puncture with a hypodermic needle produced a severe hemorrhage, which was difficult to control. The cyst was evidently in communication with the subclavicular vein. It was rapidly increasing, and there seemed to be great danger of its rupture and the death of the child. Operation, on the other hand, seemed too dangerous and wellnigh impossible from the amount of hemorrhage that must necessarily occur. The author consequently attempted to compress the tumor by the application of cotton and a compressing bandage. His efforts were successful; the tumor decreased one-half its size in six weeks, and in four months nothing remained. There has been no return and there is no trace of the growth at present. The child is now six years old.

Aneurisma Arterio-venosum Ossificans Traumaticum.—FICK (*Deut. Zeit. für Chir.*, 1896, Band xlv. Heft 3 u. 4) reports a case of arterio-venous aneurism of the femoral artery and vein, which occurred in the service of v. Mantaufl and which presented the peculiarity of ossification in the wall of the aneurismal sac.

The patient had a fall, with a severe bruise of the lower third of the thigh. Swelling and marked ecchymosis followed, with pain upon pressure. The swelling subsided, but a small tumor remained, which was painful on pressure and also on motion, interfering with the usefulness of the limb. The tumor lay on the inner aspect of the thigh, at the junction of the middle and lower thirds, adherent to the bone, with no discoloration or swelling of the soft tissues surrounding it at the time of entering the hospital.

The history and bony hardness of the tumor led to a diagnosis of osteo-