chlorate, and the mixture is boiled for from three to four minutes on a sand-bath. The hot fluid is then poured into a test-tube and allowed to cool undisturbed. After the lapse of from one to twenty-four hours a more or less abundant flocculent yellow deposit is found at the bottom of the tube, which consists of sheaves and rosettes of golden yellow crystals. As both sugar and albumin vitiate the experiment these substances must be thoroughly removed before the test is made. Since it was found that the urine not only in pancreatitis but in carcinoma of the pancreas and in certain other conditions when there was a destruction of tissue yield these crystals, a second experiment was necessary to eliminate these factors.

(b) 20 c.c. of urine are filtered and thoroughly mixed with half its bulk of a saturated solution of perchloride of mercury. After standing for a few minutes, it is carefully filtered, and to 10 c.c. of the filtrate 1 c.c. of strong hydrochloric acid is added. After this procedure the steps are the same as in (a). If the case is one of pancreatitis the yellow crystals are not found in the urine treated by the (b) process. In malignant disease the crystals are present. Besides this differentiation the crystals showed varying degrees of solubility in strong sulphuric acid. Crystals from cases of acute pancreatitis dissolve in from a few seconds to half a minute. Crystals from cases of chronic pancreatitis dissolve in one to two minutes, while in carcinoma of the pancreas solution takes place in from three to five minutes.

Observations made with the urine from three cases of acute pancreatitis, fifty-one cases of chronic pancreatitis, and fifteen cases of malignant disease showed that the test was surprisingly accurate. Mistakes are more likely to be made in cases of cancer of the pancreas, although in thirteen out of the fifteen instances a correct diagnosis was made by the urine examination. The author considers the reaction of great assistance in differentiating the acute and chronic forms of pancreatitis from diseases simulating these conditions.

Change in the Spleen in Pernicious Anæmia, etc.—KURPJUWEIT (*Deutsch. Archiv für klin. Med.*, 1904, Band lxxx. p. 168) studied, by means of smear preparations and sections, the cellular elements of the spleen from cases of pernicious anæmia and from other diseases. He finds in every spleen finely granular cells which he interprets as myelocytes. Eosinophilic myelocytes and normoblasts are only seen in spleens which have suffered alteration through congestion, infectious processes, and severe anæmias. The author believes that under certain conditions the spleen may undergo myeloid transformation, partly through the proliferation of the pre-existing myelocytes and partly through emigration to other cells, to which class belong the eosinophiles and normoblasts.

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