venience, a list of the medical colleges in your State, together with the names and addresses of officers, members of faculties, or others who may be written to for detailed information. Very truly yours, J. W. SCOTT, M.D.,

Secretary.

Cheese Poisoning Cases at Mansfield. Final Report.

MANSFIELD, OHIO, Aug. 14, 1893.

To the Editor—Dear Sir:—In compliance with my promise made some time ago to furnish you a report of the analysis of the cheese supposed to produce the numerous cases of so-called "cheese poisoning," in our city some weeks ago, I herewith submit you the same, together with the letter accompanying it from the Dairy and Food Commissioner, which is as follows:

Office of OHIO DAIRY AND FOOD COMMISSION, STATE HOUSE
Dr. B. F. McNEAL, Commissioner. Columbus, O.
GEO. A. ROOT, Cincinnati, } Assistants.
W. H. STEWART, Solon, }

COLUMBUS, O., Aug. 12, 1893.

R. HARVEY REED, M.D., Mansfield, O.—My Dear Doctor:—Enclosed find report of analysis made by Prof. Kauffman of the cheese you sent to Dr. Probst. The other two chemists have not reported the results of their analysis yet, though one of them has intimated that tyrotoxin was present.

Will let you know the results of their work when I get their report. Yours truly, F. B. McNEAL.

OHIO DAIRY AND FOOD COMMISSION—DAILY REPORT OF
CHEMIST.

Serial No. 22. Received from Dr. F. B. McNeal. Date July 23d, 1893, marked ———:

No. — Date July 18, 1893.

Name of dealer, Mr. Herring. Sample of cheese.

Place of business, Mansfield, Ohio.

Name of producer, Mr. Maybee,—cheese said to contain poison.

Place of business, near Mansfield, Ohio.

Sample of cheese brought by Dr. McNeal.

Taken by Dr. R. Harvey Reed, health officer.

ANALYSIS.

Water, 30.116 per cent. Fat, 34.986 per cent. Casein and milk sugar 30.614 per cent. Ash, 4.284 per cent. Fat to total solids 50 per cent. pure butter fat.

No metallic poison found; etherial washings from aqueous extract gave positive reactions for tyrotoxin. Five minims of a solution of the etherial washings placed upon the tongue of a kitten immediately caused frothing at the mouth and in a few moments dryness of the throat, rapid breathing and retching; after about an hour violent purging. Cheese contains tyrotoxin. GEO. B. KAUFFMAN,

[Copy.]

Chemist.

The fact that the investigation of Mr. Maybee's factory by the Food Commissioner, accompanied by an expert cheese manufacturer, has shown that tainted or spoiled milk had been used in the manufacture of the cheese, and in addition to this that two sick cows were found among the neighbors who furnished milk for the factory goes to show one of two things; either that tyrotoxin was the result of fermentation or the result of using milk from sick cows. While the milk of the latter may not have been good, yet at the same time we do not believe that that was the cause of the tyrotoxin, which we are inclined to think was the result of either spoiled milk in the first instance, or over fermentation in the preparation of the curd in the second instance. It is the custom of the cheese makers to allow it to stand until a certain degree of "acid," as they term it, is allowed to arise and when present makes cheese very light and spongy but which, in fact, is only the result of fermentation producing gases which penetrate the cheese during the process of pressing. This makes it light and porous, and at the same time is undoubtedly, when carried too far, the cause of fermentation followed by tyrotoxin, or possibly, in certain cases, other poisonous compounds of

a similar character, which we have already referred to in our former article, which Dr. Vaughn says he has found and isolated, the result of which those who have been studying this matter well know have been published by him. At the same time it is not always reliable to depend upon the chemist's analysis alone in these cases, unless you should find tyrotoxin or some of the other poisonous proteids and clearly demonstrate their existence by giving them to a kitten or some animal which is easily affected with such poisonous substances. When this can not be done satisfactorily a bacteriological examination should be had, and the nature and character of the germs determined in this way. It is well to make a bacteriological examination even where tyrotoxin is present, for as Dr. Vaughn well says "the exact nature of the poison present will depend upon the kind of germs producing it."

I am very glad that Prof. Kauffman has been able to obtain tyrotoxin in this case, as I have every reason to believe that it *does exist* in a large number of these cases of cheese poisoning, although in some instances the toxic effect may be due to other poisonous proteids.

The lesson we have learned from these cases seems to be clearly demonstrated, not only by the report of the expert who examined the factory, but by the chemical analysis that has followed,—that *over fermentation or decomposition of milk has been the prime cause of the whole trouble*. The sooner our State Boards of Health or, if necessary, the law makers of our various commonwealths, pass rules or enact laws which will prohibit cheese makers from allowing cheese to become over-fermented or to use spoiled milk for its manufacture the sooner we will find these cases of "cheese poisoning" diminishing. There is no more reason why a manufacturer of cheese should be allowed to let his cheese become fermented to such an extent as to produce poisonous compounds in order to make it light and salable, than there is for a baker to be allowed to medicate his bread or allow it to "raise" until it is sour in order to make it white, light and spongy. Very respectfully submitted,

R. HARVEY REED.

Agnew's or Quimby's Operation?

DENVER COL., August 25, 1893.

To the Editor:—In the last issue of the JOURNAL I notice that in reporting the discussion upon Dr. Manley's paper on "Tarsal Amputations," Dr. Quimby is quoted as describing a modification of Pirogoff's amputation, and that other participants in the discussion are then quoted as calling this modified Pirogoff's procedure, "Quimby's operation." While it may be that the operation was original with Dr. Quimby, it was not necessarily originated by him, as it is described with brevity and clearness by Agnew in the second volume of his "Surgery," page 361, in the following words:

"Instead of sawing off the malleoli and the articular surface of the tibia, I allowed them to remain, and placed the calcaneum in the mortise between the two; the union was complete and was followed by a remarkably useful stump. In other instances I have done this and with satisfactory results."

Then follows a brief discussion of the new operation, and there is an illustration of a preparation obtained from a patient upon whom the operation had been done.

Respectfully,

WM. P. MUNN.

A Treatment of Temulentia.

"*Dum loquimur tempus fugit*," may be somewhat freely translated,—while we are discussing their methods the empirics (quacks?) are quietly raking in the ducats. The fees exacted by the different cures range from \$105 up.

Any regular physician desirous of learning the writer's method for successfully combating alcohol addiction may address, (stamp enclosed.) C. M. FENN, A.M., M.D.
San Diego, Cal.

BOOK NOTICES.

International Clinics: A Quarterly of Clinical Lectures on Medicine, Neurology, Pediatrics, Surgery, Genito-urinary Surgery, Gynecology, Ophthalmology, Laryngology, Otolology and Dermatology, by Professors and Lecturers in the Leading Medical Colleges of the United States, Great Britain and Canada. Edited by JOHN M. KEATING, M.D., LL.D., Colorado Springs, Col.; JUDSON DALAND, M.D., Philadelphia; J. MITCHELL BRUCE, M.D., F.R.C.P., London, Eng. and DAVID W. FINLAY, M.D., F.R.C.P., Aberdeen, Scotland, Vol I. Third Series. 1893. Pp. 360. Philadelphia: J. B. Lippincott Company.

There are fifty contributors to this volume, twelve of whom are British subjects and two French. They present a wide range of topics—seventy-five in number. The department of medicine occupies 121 pages, neurology forty-eight, pediatrics twenty, surgery sixty-four, genito-urinary surgery sixteen, gynecology and obstetrics forty-three, ophthalmology eleven, otology and laryngology twenty, and dermatology twelve.

In order not to trespass too much on the space in our plethoric JOURNAL, only a few notes can be culled on growing subjects that are exciting considerable discussion in medical circles.

A fair idea of the usefulness of the book as a representative of the progress in medicine, can be gained by referring to the lecture of Dr. W. H. Porter on Bright's disease. His work represents the best class of articles in this volume and he occupies ten pages with important teachings, the iconoclastic nature of which will shock the physiologists. His text is fresh and full of suggestions for rational methods of treatment and diet. On page 76 he says: "Bright's disease is not, as it used to be considered, equivalent to signing one's death warrant but, on the contrary, we can cure a large proportion of renal diseases. We must not look upon these diseases as local specific conditions belonging to the kidney alone, for all the lesions occurring in the kidney are secondary to physiological disturbances which have gone before, and our treatment should be directed not so much to the kidney as to these prior conditions."

While most books on physiology teach that glucose, albumin and proteid matters are diffused through the blood vessels, Porter claims that the albumin found in the urine is a by-product of incomplete oxidation thrown out by the epithelial cells, and that it is not filtered through the capillary blood vessels. He asserts that glucose has never been found as such in the blood, notwithstanding that it is commonly so stated in the works on physiology; but he maintains that it is produced by the renal cells, is not formed from the starches and sugar, but is a by-product resulting from incomplete oxidation. The glucose supposed to have been found in the blood by physiologists was the result of faulty tests.

The milk diet is used, together with ox bile in two or three grain doses of the purified inspissated bile three or four times a day, for its antipyretic action. He believes it is even more effective than the salicylates, which he uses to combat fermentation and heat production, and to favor heat radiation. He condemns the modern antipyretics as active poisons and powerful depressants to the cerebro-spinal centers. "One authority has been frank enough to state that he has killed patients with them."

About fifty or sixty cases of typhoid fever altogether have

been treated with ox bile without a single fatal result. Dr. Zeh has treated some of the worst typhoid cases, having very high temperature and with very severe hemorrhages from the bowels, with nothing else but inspissated bile and a little nitro muriatic acid, with a well regulated diet and alcoholics when required, and not a single case has died.

Dr. W. O. Moore refers to a number of cases of exophthalmic goitre that were reported by Dr. A. M. Hamilton as having been absolutely cured by an aqueous solution of hydriotic acid in increasing doses. He classifies the disease as a purely nervous one, and does not believe there is yet any specific treatment. He presented a rare case in which the eyeball was literally dislocated through the commissure of the lids.

Dr. F. M. Crandall treats of rheumatism in children and maintains that salicylate of sodium does not fulfill all the requirements. While it relieves the subjective symptoms more promptly than any other remedy, it does not materially lessen the danger of endocardial inflammation. It does not increase the liability to cardiac involvement, although it is a cardiac depressant in large doses. He insists that although the alkaline treatment is slower, the cure is more permanent, and the danger of endocarditis less. He combines the two plans of treatment.

This book is like the previous editions and is a worthy addition to the progressive physician's library.

The Surgical Anatomy and Surgery of the Ear. By ALBERT H. TUTTLE, M.D., S.B., of Cambridge, Mass. With Twenty-eight Original Illustrations, reproduced from the writer's Drawings from Nature. Detroit: Geo. S. Davis. Paper. 1892.

Dr. Tuttle has furnished a little handbook of inestimable value to the aural specialist. It contains a brief account of what is most necessary for them to know in order to recognize the various affections of the ear and brain that require surgical operations, explanations of the various methods, together with directions for their performance.

The importance of this subject is mentioned on page 77 in the following words: "If we leave out the cases of tubercular meningitis and disease directly following and a result of trauma, comparatively few instances of suppurative inflammation of the brain or its meninges will be found associated with middle ear disease."

For the sake of brevity the author has sometimes sacrificed perspicacity. Some confusion results from the habit of using the terms drum and drum head synonymously. He advises the instillation of chloroform for killing insects in the ear, to be followed by syringing with warm water to wash the insects out. We have seen severe inflammation result from this use of chloroform by druggists. It is unnecessary, as the syringing alone does the work. If the ear is simply filled with warm water the live insect is drowned and floats to the surface.

In using the letters of reference to the illustrations it is often impossible to know to which figures they refer. The same remark might be made relative to the descriptions accompanying the excellent plates showing the various sections of the bone.

On page 45, in treating of operations for the removal of the drum head, the author misquotes Bishop, no doubt inadvertently. He says: "In 1885 Bishop reported fourteen cases of deafness operated upon by the removal of a piece of the membrana tympani without injuring the ossicles; although the patients all expressed themselves as hearing better, the writer could see no difference." Bishop said: "The operation improves hearing, and sometimes relieves distressing noises and other subjective symptoms when nothing else would."