pain thrice daily, but without avail. Piecemeal, that man rotted away, a source of horror to himself and his surroundings. Such a case is but one of the instances that occur not infrequently in the physician's practice. Would it not be an act of mercy to practice anesthesia to its fullest extent and allow death to "come to him quietly, as a dream in sleep?" On the other hand, should the portals to the application of euthanasia be open, there is hard telling at what stage they would close.

Human beings are presumptuous. Make no restrictions and matters will run riot. Society, in order to maintain and protect itself, can not rely on the judgment of certain individuals. The law, therefore, laid down hard and fast rules, which every one, without exception, must obey. Human beings are weak; temptations are great. Should law be silenced on this point? Some physicians might, under the pretense of doing a merciful act, really commit a deed of felony. Let us illustrate. An old man, very wealthy, is suffering from an acute attack of peritonitis. He has an unlawful child to whom he thinks to bequeath his estate. He also has a nephew who is nursing him, and who is aware of that fact. This nephew is very anxious to possess himself of this old man's estate. Something must be done to prevent the old man from carrying out his intentions. The attending physician is a poor man. The nephew offers him a thousand dollars to apply euthanasia. The physician yields to the temptation. He hastens the old man's ascent to Heaven, and a double wrong is thus committed, to-wit: a life is taken and a rightful heir deprived. It is thus seen that the permission of the application of euthanasia would not infrequently be a paving of the way to injustice and crime. What, then, should we do?

Having considered both sides of the issue, our conviction is that, after all, it is far better for the welfare of society to let a few suffer, and not run the risk of creating crime and criminals. It appears to us that there is ample reason to dread that the practice of euthanasia would, in the long run, cause more harm than good. That is why the law, laboring as it always does for the good of the majority, has logically prohibited it. The working principle of jurisprudence is still the celebrated adage of the great utilitarian, Jeremiah Benton, the greatest happiness to the greatest number.

In no case, therefore, should the physician intentionally or directly cause death. "*Causa causæ est causa causati*" should be his warning. In other words, whenever the treatment of the physician is the direct cause, he should be considered as having created the cause; hence, he should be held responsible for its effects.

The physician is always under a great responsibility. At no time can he ever exercise too much caution. Due to the variety of circumstances, and the complexity of human nature, no ironclad rules can be laid down. But as a general proposition, it might be stated that he should at all times do his utmost to alleviate pain, and make the pangs of death as void of agony as possible. By doing so he will have complied with the highest standard of ethics, and will earn the gratitude of humanity.

Large Child.

Dr. J. Pfeiffer reports in the *Orvosi Hetilap*, No. 34, what he considers the largest child born in good health and spontaneously. As quoted in the *Bull Méd.*, the child weighed 6600 gm., or about 14.1 pounds. It was 55.5 cm. in length, and the head measured 37 cm. in circumference. The placenta weighed 2150 gm. and the cord was 53 cm. long.

REMOVAL OF A PIECE OF STEEL FROM THE GLOBE BY ELECTROMAGNET.

WALTER B. JOHNSON, M.D.

PATERSON, N. J.

James Andrews, 35 years of age, was presented to me by Dr. William S. Colefax, of Pompton, N. J. March 24, 1900. The patient had received an injury of the eye. While nicking bars with a steel chisel, a chip flew from the bar and struck him in the left eye. The foreign body punctured the globe at the upper third of the cornea, inflicting an oblique wound which extended entirely across the cornea in the superonasal quadrant from limbus to limbus. It passed into the globe through the iris and lens and into the vitreous chamber. The iris was prolapsed and the globe apparently filled with blood. The eye was cocainized and approached with the small end of the magnet devised by the writer; the piece of steel located and as it was engaged by the point of the magnet it was gradually withdrawn, the resistance being very slight. The prolapsed iris was then snipped off and the edges of the wound coapted.

The removed steel was crescent-shaped, $\frac{3}{8}$ inch in length, over $\frac{1}{8}$ in width and $\frac{1}{16}$ in thickness.

The eyes were bandaged and the patient sent to the Paterson General Hospital. He remained in the hospital four weeks; during the first two weeks the eyes were kept bandaged. He made a slow recovery, but never had any pain. During the next two weeks the eye was protected by London-smoke glasses. The only symptom which annoyed him was lachrymation on exposure to the light. There was considerable injection, which persisted. The pupil was distended and the lens cataractous. On May 19, there is very little redness of the eyeball remaining; there is no pain; the patient's health is good. He has been working for the past week; he still has some lachrymation in the left eye in the morning. The tension of the eyeball is normal; the patient can see shadows; the cataractous lens prevents ophthalmoscopic inspection. The appearances indicate the preservation of the eyeball and possible subsequent operative procedure for visual effect.

Medical Testimonials to New Remedies.—This was one of the chief questions discussed at the German Congress of Physicians and Naturalists held at Aix-le-Chapelle in September. Prof. His stated in his address that the creation of a central official laboratory for the testing of new remedies was an urgent necessity. No physician should write a testimonial in favor of a new remedy unless he has exceptional opportunities for testing it in hospitals or clinics. It should only be addressed to the profession and no one should be allowed to use it for advertising purposes in the daily press nor for general distribution. Physicians whose inventions are commercially exploited are responsible for the manner in which the advertising is conducted. Kobert insisted that before a remedy can even be advertised in the medical press it should be subjected to thorough theoretical tests in the chemical, bacteriologic, pharmacologic and physiologic laboratories and then tested on animals.