broad and comprehensive scale. He did not think the present appropriation was large enough for the work required, and stated that he had been so impressed with what he had heard at this meeting of the good accomplished by school inspection that he would use all his influence to secure more funds for its further development.

TYPHOID FEVER. — Typhoid fever is unusually prevalent in Jersey City, and Dr. F. N. Sauer, the head of the bureau of contagious diseases, having become convinced that the trouble is due to contamination of the city's water supply in the Rockaway River, Drs. Lambert and Finnerty of the Health Department and J. W. Griffin of the Water Department are making a special investigation to determine the source of infection.

DEDICATION OF JEWISH HOSPITAL. — The annual meeting of the Jewish Hospital Society of Brooklyn was held on Nov. 18, when it was announced that the hospital building now approaching completion, at Closson and St. Mark's avenues, would be dedicated on Dec. 9. The land, building and equipment represent an outlay of some \$350,000. Dr. Jacob Fuhs is to be physician-in-chief, and Dr. H. Beeckman Delatour, surgeon-in-chief.

APPROPRIATION FOR WATER SUPPLY. — At the meeting of the Board of Estimates and Apportionment on Nov. 23, an appropriation of \$10,000,000 was authorized for the Board of Water Supply. This is to meet a contract for the first section, eleven miles in length, of the new Catskill aqueduct; \$600,000 being required for construction, and \$400,000 allowed for administration.

Obituary.

WM. K. OTIS, M.D.

At a united meeting of the faculty of the New York School of Clinical Medicine and the trustees of the West Side German Dispensary, held Oct. 31, 1906, the following resolutions were adopted:

That, whereas, on Sept. 22, 1906, through the sudden and untimely decease of our beloved confrère, William K. Otis, A.M., M.D., Professor of Genito-Urinary Surgery, we have sustained a grievous loss; and

Whereas, the Clinical School has lost its most trustworthy secretary and excellent teacher; the dispensary a faithful adherent; the profession a scientific inventor; the public a skilful practitioner; his associates a most estimable colleague; and his intimates a loyal, open-hearted, self-forgetful friend; therefore, be it

Resolved: That we, deploring our loss, share with the bereaved family of William K. Otis their sorrow and grief, and hereby tender our heartfelt sympathy; and be it

Resolved: That copies of these resolutions be spread in full on the minutes, published in the *Medical Journals*, and a copy thereof sent to the afflicted family of the deceased.

A. ERNEST GALLANT, M.D.,

JOHN L. ADAMS, M.D.,

WILLIAM FRIEDMAN,

Committee for the Faculty and Trustees.

Current Literature.

THE AMERICAN JOURNAL OF THE MEDICAL SCIENCES.
NOVEMBER, 1906.

1. * BOVEE, J. W. *The Diagnosis of Renal and Ureteral Calculi.*
2. * JAMES, W. B. *Environment in Therapeutics.*
3. * EDSELL, D. L. *The Physiological Limitations of Rectal Feeding.*
4. * PARK, W. H., and THRONE, B. *Results of the Use of Refined Diphtheria Antitoxin.*
5. GIBBONS, H. W. *The Relation of Hodgkins' Disease to Lymphosarcoma.*
6. MARKS, L. H. *Coagulability of the Blood in Yellow Fever.*
7. GRINKER, J. *Unilateral Paralytic Chorea.*
8. SCHMITT, A. E. *Postural Treatment of Otitis Media and Mastoiditis.*
9. SOLLEY, JOHN B. *Paralysis of the Facial Nerve Due to the Eustachian Electro-bougie.*
10. VALE, F. P. *Experimental Experience with Colloidal Silver and a Virulent Streptococcus.*
11. PEARCE, R. M., and BALDAUF, L. K. *Vascular Lesions in the Rabbit from Single Injections of Adrenalin.*
12. * HIRSHBERG, L. K. *Bacillus Pyogenes Associated with a Febrile Disease.*
13. * KELLY, A. O. J. *Remote Consequences of Infection of the Biliary Tract.*

1. Bovee describes three types of cases of renal calculus disease according to symptoms. The first is that in which there occur attacks of intense pain, with vomiting, frequent micturition and later hematuria. The second is characterized by frequent but less severe attacks. The third or chronic type comprises cases in which there is a history of neglected urinary calculus but only vague pains remain, often with symptoms of infection. The principal symptoms of renal or ureteral calculus are *pain, hematuria, urinary changes and frequent urination*. In addition there may be a palpable mass, fever, passage of stones or of sand. The pain is of variable intensity, sharp and radiating down the urinary tract or to the thigh or toward the umbilicus. Hematuria of greater or less amount is rarely absent when a calculus becomes restless; pus is present in the urine of a great majority of cases. Rectal and vaginal examination may detect ureteral calculi. Cystoscopy and ureteral exploration with Kelly's bougie are useful. Skiagraphy is constantly becoming more reliable in detection of stones. Careful history and use of these methods of diagnosis should exclude other conditions.

2. James urges greater attention on the part of the physician to the regulation of the patient's surroundings, a duty too often left to the nurse. He refers especially to the questions of ventilation, temperature and light, the importance of which is emphasized by the results of out-door treatment.

3. Edsall maintains, from his own experiments and from those of others, that rectal feeding, in the great majority of cases, is merely a modified and partial starvation. It uses he freely admits, but he holds that it should not be