the disease in its usual form. The associated sclerodactyly appears quite typical of those cases previously reported in which roentgenographic studies of the bones have been made. There is a characteristic atrophy, absorption and eventual disappearance of the terminal phalanges most commonly in the hands and sometimes in the feet.

du Castel, J. SKIN AND EXOPHTHALMIC GOITER. [Paris Med., 9, May 10, 1919.]

Various dermatoses which may be associated with hyperthyroids are here taken up by the author. Vasomotor, trophic, toxic and microbial complications are fully discussed. Chronic or recurring pyrodermatitis or eczema are frequently precursors of a frank attack of exophthalmic goiter. He directs attention to the soil in true mechanistic fashion, but is oblivious to the influence of affective disturbances as causes of the exophthalmic goiter as well as the dermatoses.

Pincherle, M. PITUITARY DEFICIENCY. [Rev. d. Clin. Pediatri, 16, July, 1918. J. A. M. A.]

Pincherle gives seven pages of bibliography, and tabulates 116 cases from the literature in which the effect of pituitary treatment was recorded, as also seventeen reports on experimental lesions of the pituitary body. Comparing all this testimony with his own clinical experience amply confirms the connection between abnormal polyuria and backward physical development and pituitary insufficiency. Corroborating minor signs are the effects of pituitary treatment, the extreme tolerance for carbohydrates, the abnormally small sella turcica, anomalies in ossification, and Cushing's thermoreaction, low blood pressure, asthenia and drowsiness. In some of his cases only some of these minor points were evident, and he classifies them as "masked pituitary syndromes." They are important for research on the endocrine system, but the chief importance of their discovery lies in the possibility of improvement and cure under organotherapy. In one of his patients the arrival of puberty was accompanied by considerable development of fat, and menstruation was seriously irregular while some of the sexual characters were abnormal. Pituitary treatment in his cases reduced the excessive diuresis and polydipsia, but did not seem to modify durably the diabetes insipidus. The children increased in height and weight, but not all the signs of backward physical development subsided. Enough were modified, however, to encourage further experiments in this line with great promise. In all his cases albuminuria could be induced by forced lordosis, which indicated a low resisting power on the part of the kidneys.

Abel, J. J., and Kubota, S. HISTAMIN IN THE HYPOPHYSIS. [Jl. Pharm. and Exp. Therap., 13, June, 1919.]

This is a chemical study which seeks to determine the presence of

histamin in the hypophysis. It is a substance which, in very minute doses, stimulates unstriated muscle. It also depresses the heart action, and causes prostration when given in large doses. It is a widespread protein in plant and animal tissues and a regular constituent of the average food. It may play an important rôle, they believe, as stimulant for the gastric and intestinal musculature and also as a dilator of capillaries during digestion.

Larson, J. A. THE FUNCTIONAL CORRELATION OF THE HYPOPHYSIS AND THE THYROID. [Am. J. Physiology, 49, June 1, 1919.]

Workers have for a long time emphasized certain resemblances in structure and function between the hypophysis and the thyroid gland. If the extirpation of one gland causes changes in the structure and function of the other, there is ground for suspecting that there exists a functional reciprocity between the two.

The literature is reviewed wherein the effects of hypophysectomy upon the thyroid or the changes in the pituitary due to thyroidectomy are emphasized. The meager experimental evidence upon the removal of the hypophysis appears to point to a resultant diminution in size of the thyroid. On the other hand the effects of thyroidectomy upon the hypophysis are much more definite. The preponderance of clinical and experimental evidence shows a marked hypertrophy of the hypophysis as a result of thyroid deficiency. The hypertrophy is usually allocated to the anterior lobe.

Hypertrophy of the hypophysis following thyroidectomy has by many investigators been considered evidence of a vicarious relationship between the two glands. If it be assumed that the hypertrophy of the pituitary is physiological rather than pathological the question arises as to what extent the hypophysis can function for the thyroid. That the substitution as it exists, is incomplete, is shown by the myxedematous symptoms and often the death of the animal following thyroidectomy. This incomplete compensation might be due to the inability of the hypophysis to play its double rôle successfully; that is, to perform its own functions and to supply an autocoid capable of taking the place of the active principle of the thyroid. If this be the case the administration of pituitary substance might very well make the substitution more complete.

Fresh anterior lobe of the ox pituitary was administered to thyroidectomized and normal rats. An analysis of the data furnished by the experiments indicate that the administration of the anterior lobe of the hypophysis exerts a beneficial effect upon thyroidectomized rats. The action of the pituitary substance not only ameliorated the condition of the operated rats but actually lengthened the life of the animals. The favorable influence of the pituitary was also seen in the case of the normal rats where the coats and condition of nourishment were improved.