disease, but this diagnosis was not made because the metabolism was perfectly normal, and there was, therefore, evidently no pathological increase of iodothylin. In one case there was considerable enlargement of the thyroid, with exophthalmos, a rapid irregular pulse, lassitude, and several nervous symptoms. But as the metabolism was perfectly normal the diagnosis of Graves's disease was rejected. The authoress concludes that the estimation of the absorption is a useful diagnostic test, of special value in the differential diagnosis of indefinite forms of Graves's disease and myxedema. This index of metabolism is also useful as showing the effect of treatment on both these diseases.

Jensen, C. O. STANDARDIZATION OF THYROID PREPARATIONS. [Hospitalstidende, August 18, 1920. J. A. M. A.]

Jensen refers to the axolotl, the larva of *Ambystoma mexicanum*, which is being used more and more in laboratory research. It does not undergo the metamorphosis usual in such amphibians, but persists and breeds in the larval stage, without the transformation process which changes it like the tadpole from a water to a land animal. He has found that treating the axolotl with thyroid preparations is promptly followed by natural metamorphosis. This occurs so invariably that he suggests that this may be utilized for standardizing thyroid preparations. He explains the phenomenon as due to an inherited substandard condition of the animal's own thyroid gland reducing its functional capacity below the level required for the physiologic metamorphosis. The effect of the thyroid preparations did not parallel their iodid content.

Escudero. THYROID DYSPEPSIA. [Rev. Esp. de med. y cir., July, 1920.]

Functional disturbances of the thyroid may give rise to gastrointestinal symptoms. Clinically two forms of this thyroid dyspepsia may be distinguished—one corresponding to thyroid insufficiency and another due to hyperthyroidism. The first is characterized by a tendency to low gastric values, and includes the majority of hypochylia or achylia syndromes. The second form shows a tendency to high gastric values, but sensory disturbances appear first and persist. Disturbances of secretion may be absent; when present they may vary from heterochylia to permanent gastric hypersecretion. Chronic gastritis is the necessary termination of these cases.

Gordon and Bazin. CHRONIC DIARRHEA ASSOCIATED WITH ADENOMA OF THYROID GLAND. [Canadian Med. Assoc. J., April, 1920. B. M. J.]

A woman, aged 33, who had complained during the past ten years of alternating diarrhea and constipation, with vomiting and headache; she had lost 15 pounds in weight and felt "nervous." Physical examination was negative except for a small adenoma of the right lobe of the thyroid; this was regarded as a possible cause of symptoms of mild