the occurrence, side by side, of two names for the same thing must be very confusing to the student. Considerable additions have also been made to the chapter on the ductless glands, and new figures have been added to the section on the central nervous system. We could have wished that, in view of their extreme importance in practical medicine, the author had dealt more fully with the recent work on the output of the heart and on the various ways in which its efficiency as a pump is maintained.

Facts and Fallacies of Compulsory Health Insurance. By FREDERICK L. HOFFMANN, LL.D., Statistician, The Prudential Insurance Company of America; Fellow, American Statistical Association, Royal Statistical Society, &c. An Address read in part before the Section on Social and Economic Science of the American Association for the Advancement of Science, Dec. 23th, 1916, and the National Civic Federation, Jan. 22nd, 1917. Pp. 101.

In a pamphlet which is distinguished by orderly arrangement and lucidity Dr. F. L. Hoffmann examines the existing systems of National Insurance in Europe—that is to say, in Great Britain and Germany—with a view to ascertaining how far a similar system, based upon the experience of the nations named, would be likely to prove beneficial if adopted by the several States of America and the Federal Government. His investigation is hardly of a judicial character, and no doubt he would reply that he did not intend it to be, and that his advocacy, directed intentionally against such proposals and suggestions in favour of National Insurance as may be current in the United States, could be in no way disguised. Nevertheless, he has selected statements of facts and of opinion for citation rather too exclusively from the utterances of those hostile to National Insurance, at any rate, so far as this country is concerned, and has contrived to give the impression that nothing is to be said on the other side, and that with us no voice could be raised worth listening to in support of any view different from his own. His work in this respect is therefore rather less interesting than are his comparison of social conditions in America with those prevailing here, and his suggestions as to possible social legislation for the national health in his own country.

On the whole, however, he makes out a strong case in favour of the non-adoption, or of considerable caution in the adoption, in America, of the examples set by us and by Germany, and he is no doubt right in what we are inclined to regard as his main contention, which is to be found summarised on p. 94. He there says that pecuniary support, except during very prolonged sickness, “is not a matter of economic importance to the average American wage-worker, more properly concerned with an increase in wages and a decrease in working hours and other matters concerning the maintenance and the raising of his standard of life.” Similar tendencies in social and national health development are not unobservable here, and are likely to become more conspicuous when peace permits.

New Inventions.

AN ARM REST.

DURING the present prolonged war much time and thought have been devoted to the preservation of damaged limbs. Varied and cleverly contrived apparatus has enabled us to maintain them in comfortable positions, so that the con-

tinuity of the shattered bones may be ensured, and no effort spared to preserve the former usefulness of the damaged limb. No difficulty therefore has been as yet experienced in this direction, and it is only in regard to the question of transport that any feeling of anxiety arises. On board ship I have experienced great difficulty in transferring damaged arms, when placed in an extended position, from the ambulance to the ward, and I want to draw attention to the simple contrivance which has made this transference easy on board the H.M.A.T. *St. Andrew*. The apparatus is very simple, light, and cheaply produced. It can be quickly and securely adjusted for use either on a stretcher, a ship's cot, a train bed, or hospital bed. After months of use I can confidently recommend it. The arm-rest may be obtained from Messrs. Arnold and Sons, Giltspur-street, London, E.C.

O.C. troops, H.M.A.T. *St. Andrew*.

THEO. M. KENDALL,
Major R.A.M.C.

APPARATUS FOR THE ISOLATION AND CULTIVATION OF ANAEROBES.

To simplify the cultivation of anaerobes, the apparatus here illustrated has been fitted up.

To expel the air, the apparatus is heated in the autoclave. Air and steam escape through the cut (E) in the rubber tubing (D) (Bunsen's valve). When the apparatus cools, the steam condenses and atmospheric pressure closes the slit and prevents air entering. At the same time water rises in the pipette (J) as far as the glass bead (I). To inoculate the culture tube (A) an emulsion of the material to be cultivated is made in a tube of recently boiled broth or saline, and the end of the pipette (J) is placed in it and the rubber round the glass bead (I) is made oval by pressure with the finger and thumb. When the fluid has entered the large tube, the pressure is relaxed.

If it is desired to isolate the various species of bacteria in a mixture, agar is used instead of broth for the culture medium in the large tube. This is melted, and before solidifying is mixed in the manner above described with the emulsion. The agar is then sloped or distributed over the walls of the tube by gentle rotation.

Anaerobic blood cultures can be made direct from a vein by substituting a hypodermic needle for the pipette.

I am indebted to Corporal H. J. Mann, S.A.M.C., for his assistance.

B.E. Force, France.

ALFRED R. FRIEL,
Captain, S.A.M.C.

TAUNTON AND SOMERSET HOSPITAL.—The Prince of Wales has given £100 to a fund which is being raised to discharge the debt of £4000 which exists against the Taunton and Somerset Hospital.