was not shortened, one of the return cases infecting the family three months after the primary onset. Therefore the authors are not convinced of Milne's claims from the above experiences in Eppendorf.

Purpura in Infective Diarrhea.—H. D. ROLLESTON and J. B. MOLONY (*Brit. Jour. Child. Dis.*, 1912, ix, 1) analyzed 100 cases of infective diarrhea in infants to determine the frequency of symptomatic purpura in this disease. Of the 100 cases, averaging infants from seven to eighth months and of both sexes, 67 proved fatal. Of the 67, 16.4 per cent. showed purpura. None of the purpuric cases showed edema. The abdomen and thorax is the frequent site of the purpuric eruption, though the arms and legs are occasionally involved. The hemorrhages are usually small, but may be so closely set as to make the abdomen appear uniformly purple from a distance. The purpura was usually a late symptom and appeared about the thirty-fourth day, a week before death. Occasionally the hemorrhages came out in crops. Transfusion and the administration of horse or other serum seemed to have no influence in causing purpura. In one case only was there evidence of infantile scurvy. No close relation is suggested between purpura and the edema sometimes seen in infective diarrhea. The prognosis appears extremely grave, as all the cases mentioned above died. Voelcker, however, says it is by no means a necessarily fatal sign. To conclude, symptomatic purpura in infective diarrhea mainly occurs on the abdomen and chest of infants under one year of age. It is usually a terminal phenomenon in prolonged cases, and the prognosis is extremely grave.

Drunkards' Children among the Weaklings at School.—EUGEN SCHLESINGER (*Munch. Med. Woch.*, 1912, lix, 649), reporting his observations on weak and backward school children, states that the two important factors in the inherited low resistance and organic weakness of many children are, first, a neuro-psychopathic constitution of the parents, and second, alcoholism in the parent. Next in importance and frequency is syphilis. Out of 200 weaklings studied, Schlesinger found 30 per cent. who were the children of drunkards. A percentage of 40 to 60 was found in severe intellectual weakness, in imbecility, and idiocy. The low vitality found in drunkards' children is traced back to the female parent. Sullivan and Arrivé state that 55 per cent. of the children of alcoholic mothers die either at birth or within two years. The extent of the degeneration in the children can be gauged by their constitution. Only 33 per cent. of them were in good constitution, 57 per cent. only fair, and 9 per cent. very poor. These unfortunate children show nutritional disturbances, catarrh of the respiratory tract, and especially lowered immunity to infections from their first year of life. The most intense and destructive effects of this heredity are seen in the central nervous system, especially the motor side, resulting in convulsive attacks, tic, and epilepsy. While defective intelligence was probably not more marked in the drunkards' children than in other defectives, the psychic, ethical, and moral defectiveness was well marked and combined with an unstable, mercurial temperament. A tendency toward alcoholism is often observed in the offspring of alcoholics. The future of such children is unpromising and an early severing of home associations and strict disciplinary schooling is imperative.