

Thompson, almost at the same moment, upon the other side of the Atlantic, introduced into the bladder a sound with an attached microphone, and made audible to a number of assembled students the instant of contact of the beak of the instrument with the last remaining fragment of a crushed calculus. In his lecture upon this subject, as it appeared originally in England, the experimenter was made to appear as distrustful of the future of the microphone, in this connection, as he certainly was of the future of the endoscope.

It is to be regretted that our author should not have contributed to establish uniformity in the matter of the gauge of urethral instruments. He still reproduces (page 47) the wretchedly defective plate, which has done duty in earlier editions, as "the French or Charrière gauge," and, while praising his neighbours across the Channel for their "exactness," admits that the English measurements are arbitrary and without uniformity. It does not seem to have occurred to him that he was the very man, and his the great opportunity, to take a step which would largely contribute to bringing order out of chaos.

The typographical appearance of the work is all that could be desired; and the cuts are neither better nor worse than those which are to be seen in every American treatise on the same subject.

J. N. H.

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ART. XXV.—*State Board of Health Reports.*

1. *Tenth Annual Report of the State Board of Health of Massachusetts.* Jan. 1879. 8vo. pp. 309. Boston, Mass., 1879.
2. *Sixth Annual Report of the Secretary of the State Board of Health of the State of Michigan,* for the fiscal year ending Sept. 30, 1878. 8vo. pp. lxxix. 355. Lansing, Mich., 1878.

1. THE current number of the Massachusetts reports comes laden with an especial and melancholy interest. We hardly expect to be credited when we state that the Massachusetts Board of Health has made its last report! Considerations connected, we believe, with the question as to who shall be the next Governor, have led to some sort of dodge or movement, in the pretended interest of economy, for consolidating all the various Boards, Commissions, etc., into one. Of course it would be presumptuous folly to doubt for one moment that the voters of the Bay State, or its Governor, can find a body of men who shall be equally conversant with sanitation and lunacy, penology and pauperism, chemistry and metaphysics, poor-relief and ventilation. Elsewhere and formerly it has been supposed that different gifts were vouchsafed to different men, and in different measure; but we live and learn.

Dr. Clouston, Superintendent of the Royal Lunatic Asylum, near Edinburgh, contributes a paper describing what he considers an ideal hospital, adapted to the needs of this country, and to accommodate two hundred insane patients. Plans and drawings exhibit the several buildings of this somewhat composite design, both in their relations and in their individual structure. To some of us, it might appear like a rather bold undertaking for a person born and bred abroad, an entire stranger to this country, and never having, we believe, even visited it, to assume the position of instructing native Americans as to the construction of their hospitals. With every disposition to profit by tuition, we are compelled to acknowledge a misgiving that he has failed. Having no practical acquaintance with the ways, manners, and habits of our people, sane or insane, the social status of our patients, our climatic conditions, and, perhaps especially, the finan-

cial light in which all eleemosynary institutions are now very closely criticized, we need hardly say that the writer fails to hit upon such architectural arrangements as should meet the requirements.

Without going much into detail, we may say that Dr. Clouston's deviations from the commoner plans among us, consist in housing the patients in several buildings, about a hundred feet apart, and connected by glass corridors, which are also to be used as winter-gardens, promenades, smoking and exercising rooms, etc. If we understand rightly, all suitable patients, of both sexes, are to take their meals sociably in a large central dining-room, so designed as to give the effect of an arcade surrounded by a conservatory. The wards have, for the most part, rooms on one side only, with windows on the other.

That any advantage of sufficient magnitude to offset the grave objections to the plan is gained by dispersing the patients in the manner here contemplated, may well be doubted. Indeed we have personally no doubt in the matter at all. We hold that in hospital construction for the insane there should be provided every facility for the closest possible surveillance of the employés, especially the nurses. The further these are removed from the officers, the less efficient will be the supervision. In the matter of taking the daily food, we had supposed that the path of improvement lay in precisely the opposite direction to that here suggested. Knowing how offensive to others are the habits of certain patients at meal-time, we have approved the practice of some physicians in substituting for the one or two long tables, groups of smaller ones; thus carrying out the idea of classification, which, singularly ignored in this particular, is so zealously urged by Dr. Clouston in other directions. Indeed, it seems to us as if this matter of meals should be the very last in which the idea of grouping and separation is to be lost sight of.

As to expenditure, judging from the tone of public remark as to costly and "palatial" asylums, we are inclined to think that the *vox populi* would be uplifted against glass corridors, eight or ten feet wide and high, by eight hundred long, for each hundred patients, and fitted up as winter-gardens and smoking-rooms—which of course would imply, in our Northern States, some trifling outlay for fuel. Possibly a portion of the public might fail to grasp the relation between the welfare of the patients and any glass corridors whatever. If Dr. Clouston was at all fully aware of the outcry lately raised, all around us, against costly hospitals, we think he would have modified or omitted this feature of his plan, which at least can make no claims to be economical.

Two years ago there appeared in this publication an extremely interesting and instructive paper, upon the growth of children, presenting tabular statements of the heights and weights of school-children at successive ages. In addition to the principal aim of the observations, the ascertaining of the rate of growth as existing among Boston children, several curious points came into notice as side issues. The writer, Prof. H. P. Bowditch, now endeavours to ascertain the relative potency of *race*, and of *surroundings*, as causes of the superior stature and weight of the children of American parents as compared with those of foreign. It will readily be perceived that the "poorer" class and the "foreign-descended" class, to some considerable extent coincide among our population. It follows that there was, at first, difficulty in interpreting the results. Further investigations seem to show that both factors are active. Among Americans, English, and Irish, the progeny of the prosperous classes are larger and heavier than their less comfortable brothers. But, apart from this, race also has an influence scarcely inferior to that of abundant food, air, and the comforts of life generally. The small number of children of other than American or Irish descent led Dr. Bowditch in his own researches to consider only these two races. It is a significant fact, that

in comparing the poorer with the wealthier class, less difference of physique exists here than in Great Britain.

Prof. Edward Hitchcock sketches, in a very instructive manner, the admirable theory and practice of physical culture and hygiene as obtaining at Amherst College. The faculty justly deprecate that style of education which turns out the consumptive and short-lived graduate of serious aspect and pallid cheeks. For nearly twenty years physical culture has been attended to systematically, under the management of a special professor, who is a regularly educated physician. The aim is not so much to develop athletes as to make the average student healthy, hearty, active, free from dyspepsia, and fitted to work or to play with zeal and pleasure. The amount of actual illness is found to be decidedly less than before the exercises were enforced, to say nothing of the general constitutional improvement. The percentage of sickness decreases with the successive years of college life and study—less in Senior than in Freshman years.

Dr. Winsor treats briefly of the harm done by coal-gas when carelessly, or from imperfect arrangements, allowed to mingle with the air of our homes.

A thoroughly practical paper is the one by Dr. E. C. Clarke, on Common Defects in House Drains. The commoner faults, both of design and execution, are stated, and made clear by numerous wood-cuts.

Over one hundred pages are devoted to a verbatim report of a lawsuit—arguments, evidence, and all—between the city of Cambridge and the builders of a new slaughter-house. We scarcely see why so much space should be devoted to what our newspaper reporters call the “verbiage” of the case, even though it be one of great importance.

Dr. Cowles, of the Boston City Hospital, contributes a Study of Ventilation, giving the results of observations made by him in certain wards of the hospital. By ingenious apparatus, and still more ingenious sectional and ground-plan diagrams, he has ascertained and exhibited complete views of the eddies and currents produced in the rooms by various causes. The temperature and degree of humidity is also shown for different heights and lateral spaces, throughout the wards. From the report of the surgical results, no less than from the findings of the analytical chemist, we are led to suppose the diagrams do not mislead as to the exceptionally excellent diffusion and purification attained. The experiments were made in winter; we wonder if as good results were obtained in spring?

The report on the Health of Towns contains, as usual, many cases of supposed poisoning through contaminated water. A capital circular shows the public, by description and by drawings, the ways in which wells are liable to pollution.

2. The Michigan Board is eminently what is called in the West a “live” organization. It is constantly issuing circulars for popular use, upon prevailing epidemics, prevention of various diseases, different points of hygiene, treatment of sun-stroke, apparent drowning, etc., plainly written in a condensed form, and spread broadcast over the State. From its health officers it requires reports of particular cases or epidemics, liable to endanger public health. Some of these reports are very instructive.

The Board modestly but justly congratulates itself on the almost entire freedom which Michigan enjoys from the elsewhere terribly frequent kerosene disasters. Its rigid inspection of oils has practically abolished these needless tragedies. One danger, however, says Secretary Baker, is not prevented by present law; a lamp perfectly safe under Michigan inspection will become dangerous *if the chimney be broken or removed*,—the metal around the wick soon becoming heated to a point higher than the test.

President Kedzie expresses, we believe, a great truth, in saying that the rela-

tions of climatic conditions to health will be better ascertained by studying meteorological conditions in connection with prevailing diseases, rather than with deaths from those diseases.

In a report on *Lead Poisoning by the Use of Tinned Ware*, etc., Dr. Kedzie states that an alarming adulteration is now very common, by which the wash or plating of tin, covering our common pans and cans, is not pure tin, but mixed with lead. Even tin-lined lead pipe, which we had supposed a safeguard against lead in the water, thus becomes of questionable use. The professor analyzed "bar tin," bought as chemically pure, and found lead in that.

The glazing and enamelling of earthen wares are both open to objection. The first often contains lead; the second cracks, and grease and other matter soak into the pores of the ware, putrefy, and become injurious to health. "Granite ware" he found free from poison; "marbleized ware" was found to contain much lead. By actual experiment, eight ounces of pure cider vinegar took up from a quart basin—marbleized—seven grains of lead in twenty-four hours. A great sanitary want is a perfect lining for kettles, etc., which is of innocent composition, and not liable to separate or crack.

Dr. Hitchcock, of the Board, takes but little space to show the perfect baselessness of the silly notion that tomato eating causes cancer.

The universal use, in Michigan towns, of plank sidewalks, and the frequent presence of large amounts of sawdust in the streets, has given rise to inquiries as to the sanitary influences of decaying wood. Generally, the testimony as to effects is not very definite. A suggestion is made that the turpentine in the cone-bearing trees neutralizes the effects of decay. One gentleman, however, decidedly states that malarial disease in the proportion of 12 to 1 exists in a sawdust-covered district of his town, as compared to a portion not so covered. A considerable excess of cholera infantum and diarrhoea is also noted. Here the sawdust is often overflowed. How much of the alleged facts may be due to other conditions does not clearly appear. Another correspondent believes he can recognize a connection between the sawdust and cerebro-spinal meningitis, though he does not speak with much confidence.

In a report of his attendance on the annual meeting of the American Social Science Association, we are sorry to see so sensible a man as Prof. Kedzie yielding to the notion that the so-called "cottage plan" is the best for curing the insane in this country.

Secretary Baker in his report of his attendance at the State Medical Society meeting, quotes, with tacit approbation, resolutions offered by Dr. J. H. Beech, and adopted, setting forth that the great frequency of homicide, suicide, and infanticide, by persons of impaired minds, should prompt to more care and more stringent regulations for the protection of the public and the afflicted ones from such lamentable results of their freedom. The moral responsibility of physicians, in neglecting to urge proper protective matters, is forcibly stated. It is represented that while the rights of alleged lunatics should be fully respected, honest witnesses should not be liable to legal prosecutions, and thereby deterred from doing a duty and a kindness, or punished if they venture to do it. Even where the case is doubtful, witnesses should not be prosecuted without strong evidence of malice. The resolutions go on to urge the members to warn the public of the frequent danger in keeping insane relatives at home. As a contrast to the vulgar and incessant cry about "incarceration," "conspiracy," and evil motives, these resolutions are refreshing, and should do good.

A report upon outbreaks of diphtheria is introduced by an earnest warning as to the contagiousness of the disease. In a house into which new tenants had just moved, and cleaned out a very filthy cellar, eight cases soon appeared, of which

four died, in a household of ten. The former family had had no trouble, though the cellar and house had been wretchedly filthy.

Another group of nine cases with six deaths occurred. No direct evidence of contagious origin is given. The cellar contained over a hundred bushels of potatoes, which were badly decayed. A candle would not burn on the floor, on account of accumulated carbonic-acid gas. It is suggested that the more deadly oxide was probably present. The water used by the family was intolerably offensive. Two rods south was an unoccupied house with 700 bushels of decaying turnips in the cellar. The inner walls of the occupied house, moreover, were damp from new plastering. From this group, six persons, adults, mostly young, contracted the disease. These, in turn, apparently infected seven children of two of the women, an unknown number of children of the physician, and two children of the second physician. Other additional cases are mentioned as doubtful. Apparently the first family had caused disease in 23 persons. A table here given is *said* to foot up 35 cases, with 12 deaths; we can make of it only 28 cases.

Another physician reports his knowledge of 73 cases in three adjacent townships—40 in his own practice. Formerly a sceptic as to contagion, he is now fully converted. He traces all the cases to two families. The mortality in this group is not given; in the others it was very heavy.

An admirable popular tract, of three pages, on diphtheria, for popular instruction in prophylaxis, hygienic treatment, disinfection, etc., is here printed.

Another of the practical benefits of the Board appears in the form of an essay on the care and preservation of the teeth. It can be read in ten minutes by the plainest farmer's wife, and if heeded will produce incalculable good. The importance of attention to the deciduous teeth is enforced, in relation to the shape of the jaw, and the position and proper shape of the permanent teeth.

Dr. Lyster has prepared a very good article on the climate and topography of the lower peninsula, or main body of the State. By the numerous maps presented, we see that the climate is curiously varied and modified in different parts. The great lakes which surround the State, in their relations with the most prevailing winds, are probably the principal cause of the eccentricity of the isothermal lines. Dr. Lyster believes, however, that the western winds from the warm Pacific shore do not part with all their warmth in crossing the mountains, but are still able to soften the climate of the lake, and the western shore of Michigan.

B. L. R.

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ART. XXVI.—*Diseases of the Bladder and Urethra in Women*. By ALEXANDER J. C. SKENE, M.D., Professor of the Diseases of Women in the Long Island College Hospital; Fellow of the American Gynæcological Society, etc. 8vo. Pp. viii., 374. New York: William Wood & Co., 1878.

A book handsomely printed on good paper, large type, broad margins—the last quite convenient for annotations—its author one of the most painstaking, industrious, conscientious, and eminent members of the American profession, is sure to attract attention. Moreover when the subjects of which it treats are brought under the daily observation of physicians, and are often exceedingly difficult as to therapeutics as they are in diagnosis, the volume is sure to keep the attention which its handsome appearance and the fame of its author have attracted.

Dr. Skene is to be congratulated upon supplying an urgent professional want. We have been looking for this book these many years—nay, longing for it as one anxiously waiting for the morning.