

far more valuable than any ready-made abstract. We must caution our readers against supposing that physiology can be *learnt* or *understood* from these Tablets. When this has been done by the aid of lectures or some one of the standard works on the subject, the student's knowledge may be kept fresh and in a useful form by a reference to them, and they will enable him to revive his knowledge in a short time; more than this they cannot accomplish.

*Revue Mensuelle de Médecine et de Chirurgie.* Oct. 10th, 1878. Paris: Germer Baillière.—This number opens with the first instalment of an article by Professor de Tarchanoff, of St. Petersburg, upon the Psycho-motor Centres of New-born Animals, and their development in different conditions. The author professes to have proved by experiment that, contrary to the opinion of Soltmann, these centres exist and can be electrically excited in the guinea-pig even before birth, and consequently before any external impressions would call such centres into action. We must reserve detailed notice of this remarkably interesting subject until the memoir is completed. M. Le Dentu writes upon "Gangrene Foudroyante"—i. e., traumatic spreading gangrene; taking for his text a case in which the hand and arm became rapidly gangrenous after a gunshot wound, but where prompt recourse to amputation at the shoulder-joint succeeded in saving life. M. Nicaise contributes a paper on Aponeurotic and Periosteal Fibromata; Dr. Cauchois gives a note upon the Local Temperature of Neoplasms; Dr. Dreschfeld records some cases of Athetosis; and M. Desnos narrates a case of Strangulated Hernia, with death from Pulmonary Apoplexy. An abstract is given of M. Charcot's lectures on Chronic Pneumonia, of which he makes three forms—chronic lobar pneumonia, chronic broncho-pneumonia, and the chronic pleurogenic pneumonia. The usual notices of books &c. complete the number.

*Narrowing, Occlusion, and Dilatation of Lymph-channels; Acquired Forms.* By SAMUEL C. BUSEY, M.D. Reprinted from the *New Orleans Medical and Surgical Journal*.—In this reprint Dr. Busey completes his contribution to the literature of diseases of the lymphatic system. His former work dealt with congenital occlusion and dilatation of lymph-channels, the present only with the acquired forms. Its plan is similar to that pursued in the former work already noticed in these pages (see THE LANCET, 1878, vol. ii., p. 156)—that is to say, it is a compilation of cases culled from every available source of obstructed thoracic duct, chylous effusions into serous sacs, &c. The essay is marked by one fault, a fault equally prominent in the other volume—viz., a want of systematic arrangement and division of the subject. Had more care been exercised in this respect, and had an index been added, the value of the work as a book of reference would be greatly enhanced.

*Anatomical Outlines.* By ARTHUR HENSMAN. Part II.: The Lower Limb. London: Longmans, Green, and Co. 1878.—This part of a useful work, and a novel experiment in the teaching of anatomy, is as well planned and executed as the first part, which we recently noticed. The outline drawings of the skeleton of the lower limb, in a series of plates, are executed by Mr. A. Fisher, and they are sufficient to enable the student to follow each stage of his dissection, and place it on record. In the preface to the second part Mr. Hensman thus states his case: "A student, who 'gets up' his knowledge by *reading* learns to his cost that it is knowledge of a kind which vanishes in a few short weeks. On the other hand, if he has but a mental picture of the part about which he would know, his memory will carry his facts with scarcely an effort. If he be a careful dissector, the best pictures are those he makes with his scalpel—his actual dissections. .... His dissections, however, vary from day to day, and he cannot always have these by him for reference. The outlines have been designed to enable him to

chronicle the most important facts by a method which appeals to the memory through the eye."

*Wyld's Map of Afghanistan, Caubul, the Punjab, Rajpootana, and the River Indus.* By JAMES WYLD, Geographer to the Queen, 457, West Strand.—This is a beautifully executed map. It includes a corner map of the frontiers of Russia and of Afghanistan. For detail and accuracy it will sustain Mr. Wyld's reputation.

SHOULD PAROCHIAL MEDICAL OFFICERS  
BE EXCLUDED FROM GENERAL  
DISPENSARIES?

To the Editor of THE LANCET.

SIR,—A recent decision, confirming one previously arrived at by the committee of one of our dispensaries in this city (Bath), to the effect that parochial medical officers are not eligible to act as honorary medical officers to their institution, induces me to invite the opinion of the profession at large upon the question. It seems to me that to deny one the opportunity of work, though very characteristic of struggling juniors, is, in the long run, a short-sighted policy; and to throw discredit (as it does by getting a committee to come to such a decision) upon one portion of the medical profession is the way to degrade rather than to elevate the remainder. It is, perhaps, reasonable to say that surgeons and physicians of general or special hospitals shall not, at the same time, hold parochial medical appointments. But reference to the Medical Register will show that the custom varies in different places; and if this should lead in any way to an expression of opinion as to what should be the invariable rule everywhere, my object will have been attained.

I am, Sir, yours very obediently,

J. MAUNSELL, M.D.,  
Medical Officer, Bath Union.

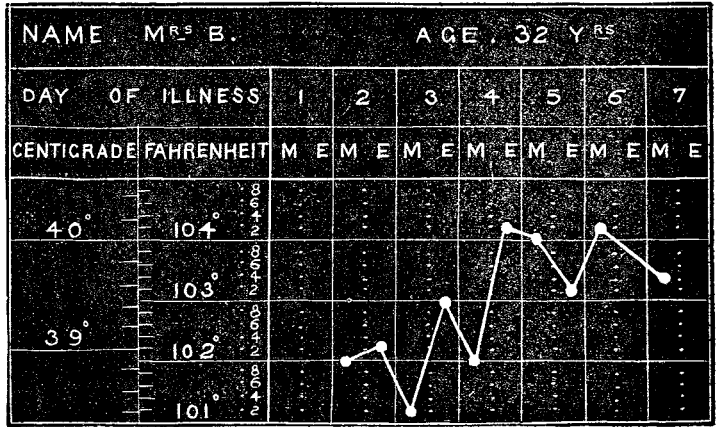
Bath, Nov. 9th, 1878.

EPIDEMIC OF PNEUMONIA.

To the Editor of THE LANCET.

SIR,—The following is a short account of an epidemic of pneumonia which occurred here in May last, with a temperature chart of the fatal case. The epidemic occurred in two small streets in this locality, the sanitary surroundings of which were bad. There were ten cases. Febrile symptoms preceded the pneumonia three, and sometimes four, days. Diarrhoea was present in two cases, abdominal tenderness in every case. A well-marked crisis happened on the eighth or ninth day, the temperature falling below normal.

One case proved fatal. Fine crepitation was first detected on the evening of the third day, slight dulness on percus-



sion on the morning of the fourth day, and then followed the usual signs of pneumonia. There was also obstinate diarrhoea, prune-juice-coloured expectoration, and great prostration. Death took place on the eighth day.

I am, Sir, yours faithfully,

JAMES COULDREY, M.R.C.S., &c.

Scunthorpe, Oct. 28th, 1878.