

in origin, although the cultures were negative, may quite probably have been the exciting agent causing the leukæmia in this case. He is inclined to believe that the leukæmia existed at the time of birth.

---

**Thyroid Treatment.**—A. MAGNUS LEVY (*Zeitschrift für klin. Med.*, Bd. 33, p. 258) gives the following conclusions from a series of investigations on this subject: 1. The loss of weight after the ingestion of thyroid is not due exclusively to loss of water and albumin, but in part, in some cases, to loss of fat. Thyroid causes, therefore, a genuine reduction of fat. 2. So far as this is due to increase of normal tissue-change it is moderate, except in myxœdema. Loss of weight amounting to five or more kilos in a few weeks is due to loss of water, albumin-breakdown, and loss of fat from (pathologically) increased muscular activity, or later, from diminished consumption of food after long-continued administration. 3. Increase of metabolism does not occur in all persons who take thyroid. It is most marked in myxœdema; is evident, but much less so, in many cases of obesity and in nervous women with masked Basedow's disease. Many fat but healthy persons show no elimination above normal. The causes of these differences are not clear; perhaps the qualitative and quantitative differences in the thyroid function come into play, besides other things. 4. The proteid deficit in thyroid feeding may continue even in case of superalimentation, and is, therefore, a specific, toxicogenic effect of the substance. It is most marked in the beginning of treatment, and can diminish in consequence of habit or for other reasons. In many individuals, it, like other effects of thyroid, may be absent. 5. Thyroidin shows effects on metabolism like those of the extract of the glands, but thyreotoxin and potassium iodide give no such results. 6. The great importance of the thyroid function in the life of the higher organisms is plainly shown on metabolism. Absence of this function causes (in cretinism, myxœdema, and cachexia thyreopriva) not only defective growth and serious bodily and psychic degeneration, but also a distinct decrease of gaseous interchange, of heat production, and of the total metabolism. The excessive and abnormal function causes (in Basedow's disease) increased metabolism and emaciation. Administration of the gland in such cases is followed by increased metabolism and improvement of symptoms. 7. The loss of fat and albumin in thyroid feeding shows a plain analogy with the same process in Basedow's disease, and is toxic when it reaches a high grade, as shown by the numerous unpleasant symptoms on the heart and nervous system, as well as by the effect on tissue-change. Thyroid preparations must, therefore, be used cautiously in the treatment of obesity. 8. The occurrence of constitutional obesity has not been demonstrated. Tissue-change in obese persons is the same as that in a normal person of the same size, weight, and musculature. Lessened tissue-change is not impossible for certain obese persons, and clinical experience suggests the possibility of great reduction of force-compensation in certain cases, but positive knowledge is lacking.

---

**Capillary Thrombosis and Blood Cylinders.**—LITTELL published some observations two years ago on the appearance of certain cylindrical bodies in the blood. He thought these were made up of blood-plates, and mentioned