

The Preventive Treatment of Serum Disease.—W. D'ESTE EMERY (*The Practitioner*, 1906, lxxvii, 754) discusses the prophylaxis of this condition, which is due to the injection of antitoxic sera and is characterized by fever, a rash of variant type, lymph-gland enlargements, and other symptoms. He says that Netter's preventive treatment, which consists in the administration of calcium chloride, is a decided therapeutic advance. The drug is administered in doses of 15 grains at the time of each injection and for two days subsequently. Among 114 cases treated thus, Netter observed 11 mild instances of serum disease, whereas in a control series of equal number the condition developed twenty times. These results are readily credible in view of the well-known fact, first shown by Wright, that many cases of urticaria are associated with a deficient power of coagulation of the blood and a diminished calcium content, and are curable by calcium chloride or lactate. Why the injection of serum should cause such alterations in the blood and what is the reason for the delay in the appearance of the symptoms are facts less clearly understood; possibly the formation of the precipitins, or of the precipitates they cause, may remove some of the calcium from the blood. If this is the case the serum disease might develop in a few patients only, that is, in those with a deficient calcium content in the blood.

Irrigations with Pulp of Pigs' Liver in Hepatic Cirrhosis and Tuberculous Peritonitis.—DESPLATS (*Jour. de sci. med. de Lille*, 1906, No. 30, p. 73) reports an instance of tuberculous peritonitis and cirrhosis of the liver, which when first seen presented general anasarca, dyspnoea, albuminuria, and hematuria. After being supervised for four months, during which time tapping was often necessary, irrigations of 10 ounces of a pulp made from pigs' liver were prescribed. In less than two months there was marked improvement, the hematuria was less, tapping was no longer necessary, and the masses in the peritoneum had decreased in size. The patient continued to improve rapidly and returned to work. Desplats reports a second similar instance in which just as remarkable a cure was attained.

The Treatment of Tuberculous Meningitis.—G. REABOLD (*Munch. med. Woch.*, 1906, No. 35, p. 1709) advocates treatment by repeated lumbar punctures and the withdrawal of the cerebrospinal fluid. He reports a cure in a patient in whom bacteriological tests confirmed the diagnosis and in whom the operation was performed twenty-four times with the withdrawal of a total quantity of 574 c.c. of fluid. In his opinion the results of the treatment are most striking. It is followed by an almost immediate amelioration of the patient's condition, which is rendered progressive by means of daily withdrawal of fluid and the consequent relief of intraventricular pressure. It should not be forgotten that the fluid is likely to re-accumulate rapidly. In determining the indications for puncture the subjective condition of the patient and the evidences of intracerebral pressure, as manifested by headache, etc., should be taken into consideration. When the febrile movement disappears and the albumin content of the cerebrospinal fluid becomes diminished, the intervals between the punctures may be lessened.