

proper destination, the public library. Neither is it, except in peculiar circumstances to buy or sell. The entire service is gratuitous, aiming to help those who wish to give, to place their gifts where there is promise of the greatest professional benefit. Already Dr. GOULD has been able to supply libraries with several thousand numbers that would otherwise have been wasted.

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CORRESPONDENCE.

A Prevalent Error in Refraction Work.

MINNEAPOLIS, MINN., Nov. 16, 1896.

To the Editor:—I have been strongly impressed for some years with the fact that many oculists, some of whom are scientific and careful men, are in the habit of over-correcting plus refractive errors. For a shorter period I have been convinced that most oculists, myself included, have been giving low plus cylinders where minus lenses were indicated.

This error has grown out of the teaching of our text-books that at six meters or twenty feet the rays of light are approximately parallel, and that for the correction of refractive errors the strongest plus or the weakest minus glass should be given which give the clearest vision at this distance.

Charles S. Bull, I think, called attention to the fact this rule would lead to an over-correction of .25 D. in the case of H., but the fact has evidently not been sufficiently impressed. With a less distance than 20' the error is evidently greater, and as a large number of oculists have not more than 15' at their disposal, unless some efficient method is at hand for checking and correcting their findings, serious trouble is likely to result. The retinoscope is a very efficient check if one has sufficient skill and confidence in his findings, and if as a final test the patient is made to look across the street while weaker and stronger lenses are alternately placed before the eye, the surgeon may be absolutely sure of his results.

While the giving of a too strong plus lens is bad enough, the other error mentioned, the giving of a low plus cylinder where a minus glass is demanded, is in some cases even more disastrous, and is unfortunately a very common error. After I had become fairly proficient in the use of the plane mirror as a retinoscope, I found that in cases where reversal of the shadow was induced by a weaker plus lens than 1 D., in one or more meridians, my patient would generally accept a +.50 or +.25 cylinder, and as my veneration for authority was stronger than my confidence in my retinoscopic results, he always got a plus cylinder. Most of my patients were satisfied that they had got the best correction possible. With the few exceptions I always found some heterophoria and satisfied most of them with muscle training. During all this time I was suspicious of my results in certain of these cases. In hyperopic cases where the retinoscope indicated a considerable degree the trial lens findings were consistent with the retinoscopic, while in the class of cases under consideration I knew they were not consistent.

In May, 1894, X., a clergyman, consulted me, complaining of eye and headache and general nervousness. He had had trouble for years and was able to do his work only with great difficulty.

He had been under the care of prominent oculists in Milwaukee and Chicago. In 1892 Dr. B. of the latter city had given him +.75 C. +.50 C. vert., which he had been able to use with some relief in his work. In 1893 Dr. Hotz had ordered constant use of +.50 C. vert. He had also ordered the use of prisms for work. I found 2° prisms base in. Whether they were so ordered is uncertain. Dr. Hotz's prescription had given decided relief for a time, though the ability to work had remained limited.

I found R. 20-30, L. 20-20, slightly improved in each eye by +.50 C. vert. Latent R. hyperphoria .5°. Esophoria at 20' 1°. At 13'' exophoria 6°. Abduction 3°, adduction 60°. Under atropia +.50 C. vert. was still accepted, improved vision somewhat and no change was made. Retinoscopic test under atropia was as follows: With plane mirror at 40'' R. both meridians — and both became + with —.25. L. both meridians +, vertical reversed by +.25 and horizontal by +.50, a showing that ought to have suggested minus lenses to any man who was less under the power of authority—but Dr. Hotz's R. of +.50 C. vert. was continued, and with muscular exercises the patient was made comparatively comfortable for another year, when he collapsed. I had then made up my mind that I had been doing faulty work in these cases, so I examined him again and found that he would accept —.50 C. hor., and that vision was decidedly better than with the plus glass. He was given the new correction, and has been in better condition since beginning their use than for many years. Several other patients have been given weak minus cylinders for whom in former years I had ordered plus cylinders, and with uniformly good results.

As I have been writing, a lady came in and reported relief from the use of —.25 C. hor. She had been ordered by some optician +.75 S. for work. She could read with comfort, but the nervousness and sick headaches continued. Under homotropia the retinoscopic findings were as follows: Horizontal and vertical meridians both eyes +. Reversed in R. by H. +1.25 and V. +1; in L. by H. +.75 and V. +.50. These findings clearly indicate a minus quarter cylinder, and such a glass with axis 45° temporal was accepted and gives complete relief, in spite of the presence of a right hyperphoria of 1.5°. A still later case is Mrs. D., whom Dr. Würdemann of Milwaukee gave +.25 C. +.25 C. V., which gave relief for six months. I find retinoscopic test to give in both eyes —, vertical reversed by +.25, horizontal by +.75. —.25 C. 75° temporal improves distant vision, makes reading easier than with Dr. Würdemann's compound plus lenses, and also gives as much relief from the glare of lamp and sunlight as the tinted +.25 S. given by Dr. Bradford of Boston. The mention of other oculists by name is in no spirit of criticism, but simply to show that other men, and competent ones, have been making these same mistakes.

EDWARD J. BROWN, M.D.

"Parasite and Host."

PHILADELPHIA, Nov. 16, 1896.

To the Editor:—Your editorial entitled "Parasite and Host" in your issue of November 14 should be read, pondered and inwardly digested by every member of the American profession. I can heartily subscribe to every word of it so far as relates to one publishing house. It is, however, gratifying to know that medical publishers are generally not guilty of the (medical) sin you so justly stigmatize, and that as a rule they are either sufficiently courteous or politic to recognize their duty to the medical profession. In this connection it is especially noteworthy that I have heard nothing of any disinclination upon the part of the one publishing firm which pays its contributors for articles published in its journals. How much more astonishing therefore is the stand taken by our publisher who pays contributors nothing ("not even reprints"), that the

matter and illustrations of articles given him shall not be reproduced by another publisher! As a physician I would not edit a journal using unpaid contributions that refused physicians the right to reproduce their articles when and where they pleased. As you pertinently observe, the object of a physician in publishing his article is to tell every medical man the results of his studies, but no periodical has a circulation more than one-tenth of the total number of physicians of our country, therefore any other means that may arise for insuring a still greater publicity is desirable, and any attempt on the part of a publisher to limit the reproduction of articles gratuitously furnished him is clearly against the author's interest and that of medical science. I cordially endorse your suggestion that in contributing to medical journals every writer make it a clearly-defined and accepted stipulation that the right to reproduce the article and its illustrations shall be free to all.

In editing the *American Year-Book of Medicine and Surgery* every publisher but one has recognized the rights of authors and of the profession as regards abstracts, extracts and the reproduction of illustrations. Curiously enough the one who refused this was one who pays its contributors nothing for their articles. As it happened, also, some of these very articles first published in the journals of this firm were written by departmental editors of the *Year-Book*. Thus an author was refused the right of using his own article because he had first given it to a lay medical journal! The *Year-Book* reaches thousands of readers that the journal can not expect to reach, and it will be remarkable if authors hereafter permit themselves to be caught in such a trap. You are correct in suggesting to the profession that it should look more sharply after its own interests, and should encourage *journals of, for and by the profession*. Cordially yours,

GEO. M. GOULD, M.D.
119 South Seventeenth Street.

BOOK NOTICES.

Important Notice Concerning Library Wants and Supplies.

Notice to Medical Men, and Librarians of Public Medical Libraries.

[Medical journals are requested to publish this notice.]

1. All correspondence in relation to the enterprise should be addressed to Dr. Geo. M. Gould, 119 S. 17th Street, Philadelphia, Pa.

2. Librarians of public medical libraries are requested to forward: 1. Accurate lists of periodicals, books or pamphlets needed to complete their files. 2. Lists of duplicates which they will give other libraries or exchange for numbers desired. *Give both volume numbers and dates of periodicals.*

3. Owing to the additional labor it would involve, queries concerning the supply of desired items to *private* libraries can not be answered.

4. The conditions of all gifts are that the recipients shall be reputable organizations, composed of the regular medical profession; that the library shall be a public one, *i.e.*, open for consultation during stated times to physicians generally; and that, if unbound, the periodicals and books received shall be bound and catalogued.

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AMERICAN MEDICAL ASSOCIATION, Reports and Transactions, 21 odd volumes, 1847-8-53-55-56-66-68 to 76 and supplement volumes 1876 to 82.

American Clinical Lectures, Vol. 2 (1876).

American Medical Journal, 1884.

American Medical Times, Vols. 1 and 2 (1860-61).

American Public Health Association Reports, etc., Vols. 1 to 17.

One } Archives of Scientific Practical Medicine, Vol. 1 (1873).

Vol. } Chicago Medical Journal, Vol. 28 (1871).

Boston Medical and Surgical Journal, Vols. 94 to 99 (1876-78).

Braithwaite's Retrospect, Vols. 50 to 89.

Canada Lancet, Vol. 8 (1876).

Chicago Medical Journal and Examiner, Vols. 27 (1870); 33 (1876); 34, 35 (1877).

Cincinnati Lancet and Obstetrics, Vols. 18 and 19 (1875-76).

One } Canadian Journal Medical Science, 1876.

Vol. } London Medical Record, part of 1873.

Detroit Medical Review, Vol. 10 (1875-76).

Gaillard's Medical Journal, Vols. 46 and 47 (1888).

Journal of Nervous and Mental Diseases, Vol. 3 (1876).

Louisville Medical News (in one volume), Vols. 1, 2 and 3 (1876-77).

Medical News, Vols. 31 to 39 (1873-1881); also Vols. 43 to 47 (1883-85); Vols. 50 and 51 (1887), and Vols. — (1860-72); Vol. — (1880); Vols. — (1883-89); Vols. — (1891-95).

Medical Gazette, Vol. 4 (1870).

Medical Record, 4, 5, 6, 7 (1869-72), 12 (1877); (1890-93).

Medical and Surgical Reporter, Vols. 34, 35, 36 (1876-7). (1885-89.)

Monthly Abstract Medical Science, Vols. 2, 3, 4 (1875-77).

Month York Medical Journal, Vols. 22, 23, 24, 25 (1875-77).

Obstetrical Journal of Great Britain and Ireland, Vols. 3, 4, 5, 6 and 7 (1875-7).

One volume miscellany.

Peninsular Journal Medical, Vol. 1 (1876).

Philadelphia Medical Times, 1870-1879, and 1882-1887.

Proceedings Philadelphia County Medical Society, Vols. 1 to 15 (1876-94).

Polyclinic, July to June, 1883-89.

Practitioner, The, 1868, July to December; 1869-73; 1877-94.

Quarterly Epitome, 1 to 20.

Reports and Transactions International Medical Congress in London, 1881. Four volumes.

Richmond Medical Journal, 1866-69.

Transactions of College of Physicians, 1889, 1890.

Transactions of Medico-Psychologic Association, 1895, Denver.

Transactions of Medical Society of Pennsylvania, 1865-1894. Twenty-five volumes.

Transactions of Medical Society of Virginia, 1896.

University Medical Magazine, October 1888 to September 1889.

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American Journal of Obstetrics, The—Vol. 1, No. 7.

American Practitioner and News—Vol. 17, Nos. Dec. to June; Vol. 18, Jan. to July.

Anatomie und Physiologie, Hyman und Schwalbe—All before Bd. 13, 1886.

Annals of Surgery—Vol. 5, Nos. 1, 2, 3, 4, 6; Vol. 6, Nos. 4, 5; Vol. 7, Nos. 1, 2; Vol. 8, Nos. 1, 2, 3, 5, 6; Vol. 9, Nos. 1, 2, 4, 5, 6; Vol. 10, Nos. 1, 3, 4, 5, 6; Vol. 12, Nos. 1, 2, 3, 4, 5;

Vol. 13, Nos. 1 to 6; Vol. 14, Nos. 1 to 6; Vol. 15, Nos. 1 to 6;

Vol. 16, Nos. 1 to 6.

Archiv für experimentelle Pathologie und Pharmakologie—

All before 1881; Bd. 13, Heft. 2; Bd. 17, Heft. 5; Bd. 18, Heft. 1 to 6; Bd. 19, Heft. 1, 6; Bd. 20, Heft. 1 to 6.