

MARYLAND

MEDICAL JOURNAL

A WEEKLY JOURNAL OF

MEDICINE AND SURGERY

OF SCHULTZ BALTO

VOLUME XXXVI. NO. 21
WHOLE NO. 832

BALTIMORE, MARCH 6, 1897.

\$3.00 A YEAR
10 cts. A COPY

THIS JOURNAL IS ENTERED AT THE POSTOFFICE AT BALTIMORE, MARYLAND, AS SECOND-CLASS MATTER.

CONTENTS.

ORIGINAL ARTICLES.

- Should Physicians be Paid for Returns of Births, Deaths and Diseases? By George H. Rohé, M. D., Baltimore. 365
- Vital Statistics. By Charles L. Mattfeldt, M. D., Catonsville, Md. 367
- Personal and Domestic Prophylaxis. By John D. Blake, M. D., Baltimore. 369

SOCIETY REPORTS.

- Conference of Health Officers of the State of Maryland. Hall of the Medical and Surgical Faculty of Maryland. Held February 17 and 18, 1897. Vital Statistics. 373

MEDICAL PROGRESS.

- Picric Acid in Burns.—Mal-Presentations.—Gonorrheal Arthritis.—Formaldehyde.—Paralysis of the Ulnar Nerve from Cycling. 376

EDITORIAL.

- The Hour of Death. 378
- The Physician's Care of Himself. 378
- Mouth Symptoms of Measles. 379
- The Physician Was tight. 379

MEDICAL ITEMS.

- BOOK REVIEWS. 381

CURRENT EDITORIAL COMMENT.

- PUBLISHERS' DEPARTMENT. 382

MERCAURO

(THE Tonic ALTERATIVE)

INCREASES THE QUALITY AND QUANTITY OF

RED BLOOD

CORPUSCLES

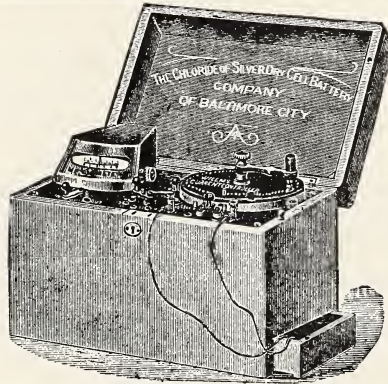
more rapidly than any other known
therapeutic agent.

AVERAGE DOSE 10 DROPS

CHAS. ROOME PARMELE CO.,
26 PLATT STREET,
NEW YORK.

THE CHLORIDE OF SILVER CELL OF DRY BATTERIES.

STAND
UNEQUALLED
AND
ALONE
IN THEIR
FIELD.



THE ONLY
REAL
PORTABLE
CONSTANT
BATTERY.
ALWAYS
READY.

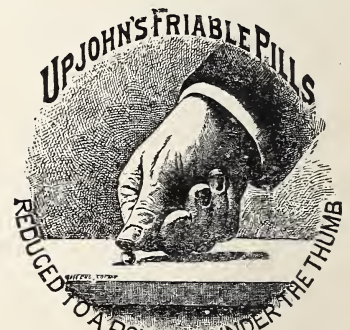
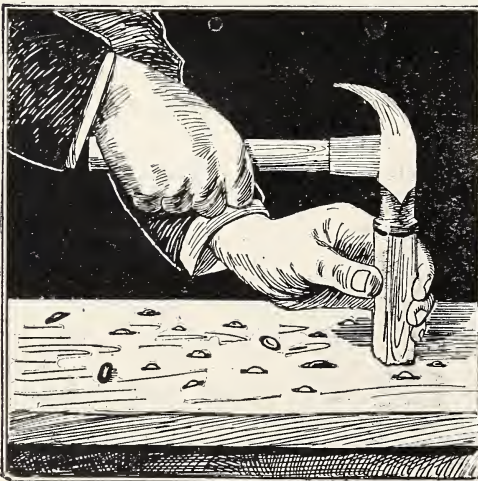
Send 4c. in stamps (actual cost of mailing) for our new Illustrated Catalogue, 7th Edition.

THE CHLORIDE OF SILVER DRY CELL BATTERY CO.,
BALTIMORE, MD.

UNDER THE THUMB

VERSUS

UNDER THE HAMMER



A certain Brooklyn druggist reports some startling experiments on pills in an article to the *Pharmaceutical Era* of December 10th. He demonstrated the hardness of the average mass pills by driving 22 out of 26 kinds selected into a pine packing case in the manner illustrated above. *THEY* IT. Three pills in the test were UPJOHN'S No. 15, 17 and 26. They were reduced to a powder with slight pressure.

Hoc Fabula Docet: Don't leave it to your druggist to put out what he chooses on your prescriptions. Specify some make. IF UPJOHN'S are best, don't fail to. **Specify Upjohn's**

THE UPJOHN PILL AND GRANULE CO.,

KALAMAZOO, MICH., AND 92 FULTON STREET, NEW YORK.

*Uniformly Effective, Agreeable and Lasting,—the
Standard Preparation of Erythroxyton Coca*

During past 30 years
most popularly used
Tonic-Stimulant in
Hospitals, Public and
Religious Institutions
everywhere.

**VIN
MARIANI**

We have received
over 7000 written
endorsements from
**PROMINENT PHYSI-
CIANS** in Europe and
America.

"MARIANI WINE"

FORMULA : The concentrated extract—the aromatic principle of the fresh Coca Leaf,
blended with a special quality of grape juice of southern France.

DOSE : Wine-glassful three times a day, or more or less at Physician's discretion.

Nourishes = Fortifies = Refreshes
AIDS DIGESTION = STRENGTHENS THE SYSTEM

AGREEABLE TONIC-STIMULANT WITHOUT UNPLEASANT REACTION.

To avoid disappointment please specify "Vin Mariani."

SOLD AT ALL PHARMACIES.

PARIS: 41 Boulevard Haussmann.
LONDON: 239 Oxford Street.
MONTREAL: 28 Hospital Street.

MARIANI & CO., 52 W. 15th St., New York.



It's a Wise Nurse

that aids the convalescence of
patients by administering

ANHEUSER-BUSCH'S
Malt-Nutrine
TRADE MARK.

—the food drink. It is the palatable
nutriment of the finest quality of malt
and hops. Its strengthening and flesh-mak-
ing properties make it invaluable to nursing
mothers, consumptives and all sufferers from
wasting diseases. Endorsed and prescribed
by the medical profession generally.

To be had at all druggists' and grocers'.

Prepared by
ANHEUSER-BUSCH BREWING ASS'N,
St. Louis, U. S. A.

Send for our handsomely illustrated colored booklet and
other reading matter.



BARTHOLOMAY BREWING CO.

ROCHESTER, N. Y.

ANALYSIS: —

By PROF. LATTIMORE,
Professor of Chemistry at the University
of Rochester, New York.

The result of the Analysis, expressed in percentages by weight,
is as follows:

Specific Gravity	. 10 11	Alcohol	. 5.30
Extract	. 3.95	Maltose	. 0.51
Dextrine	. 2.70	Albuminoids	. 0.35
Lactic Acid	. 0.12	Ash	. 0.18
Phosphoric Acid	. 0.02	Water	. 90.76

The analysis gave no indication that in the manufacture of this Beer any other substances had been used than Malt, Hops, Yeast and Water.

S. A. LATTIMORE.

None Genuine unless having our
Label and Trade Mark.

Baltimore Branch Office and Depot,

227 to 239 S. CENTRAL AVENUE, Baltimore, Md.

TELEPHONE 1060.

GEO. C. SUCRO, MANAGER.

The Chas. Willms Surgical Instrument Co.,

BENJ. A. NELSON, General Manager.

MANUFACTURERS,
IMPORTERS AND
DEALERS IN

FINE SURGICAL INSTRUMENTS.

ESTABLISHED 1869.

Deformity

Apparatus,

Elastic

Hosiery,

Trusses,

Bandages, etc.



Physicians',

Surgeons',

Hospital and

Invalid

Supplies.

Fine

Microscopes

and

Accessories.

All the Latest Novelties and Improvements Supplied upon Short Notice. Competent Ladies' Assistant

No. 300 N. HOWARD STREET, Baltimore, Md.

Illustrated Catalogue, over 500 pages, sent Free upon Application.

Highest Percentage Extract. * Lowest Percentage Alcohol.
 A Mild Stimulant. * An Effective Tonic.

Just what the physician will prescribe for nursing Mothers, Convalescents, and victims of Insomnia or Nervous Disorders resulting from impaired digestion and overwork.

BRAUNSCHWEIGER MUMME
 A PURE MALT EXTRACT—A SUBSTITUTE FOR SOLID FOOD.

Bottled for Sale and Delivered Anywhere.

LONG ISLAND BOTTLING CO.

A sample free to physicians who mention this journal.

BROOKLYN, N. Y.

HYNSON, WESTCOTT & CO., Baltimore, Agents.

<p>COCAINE C. P. ANHYDROUS CRYSTALS. STANDARD OF PURITY THE WORLD OVER.</p>		<p>MURIATE BOEHRINGER—B. & S. DISPENSED BY ALL DRUGGISTS</p>
---	---	--

COLCHI-SAL:

(Registered)

COLCHICINE SALICYLATE

NEVER FAILS IN

Gout,
 Rheumatic
 AND ALL Gout
 Rheumatoid
 Affections
 Safe,
 Prompt and Effective.



"QUI VEUT LA FIN, VEUT LES MOYENS."

COLCHI-SAL is dispensed in small Capsules each of which contains $\frac{1}{4}$ of a milligramme of Colchicine dissolved in 20 centigrammes of natural Methyl Salicylate, which is equivalent to 5 grains of Salicylate of Soda.

INDICATIONS.—In Gout in all its forms, Neuralgia, Rheumatoid Arthritis, Sciatica, Dysmenorrhoea of a Rheumatic Diathesis and all allied Rheumatoid or Gouty Affections.

Dispensed only on physicians' prescriptions.

An original bottle of 50 Capsules of COLCHI-SAL sent by mail on remittance of 75 cents to the wholesale agents.

E. FOUGERA & CO., New York

Sold by all Retail Druggists and Jobbers.

EXCELLENT THERAPEUTIC COMBINATIONS

Antikamnia and Codeine Tablets

4½ Gr. Antikamnia, ¼ Gr. Sulph. Codeine.

We meet with many cases in practice suffering intensely from pain, where from an idiosyncrasy or some other reason it is not advisable to give morphine or opium by the mouth, or morphine hypodermically, but frequently these very cases take kindly to codeine, and when assisted by antikamnia, its action is all that could be desired.

In the nocturnal pains of syphilis, in the grinding pains which precede and follow labor, and the uterine contractions which often lead to abortion, in tic-douloureux, brachialgia, cardialgia, gastralgia, hepatalgia, nephralgia and dysmenorrhœa, immediate relief is afforded by the use of this combination, and the relief is not merely temporary and palliative, but in very many cases curative.

In pulmonary diseases this combination is worthy of trial. It is a sedative to the respiratory centers in both acute and chronic disorders of the lungs. Cough, in the vast majority of cases, is promptly and lastingly decreased, and often entirely suppressed. In diseases of the respiratory organs, pain and cough are the symptoms which especially call for something to relieve; this combination does this, and in addition controls the violent movements accompanying the cough, and which are so distressing.

Antikamnia and Quinine Tablets

2½ Gr. Antikamnia, 2½ Gr. Sulph. Quinine.

In the exhibition of quinine, the antikamnia overcomes the headache and general disturbance so frequently produced, and in fact the conditions for which quinine is given frequently include headache, backache and aching of the limbs, and the antikamnia being sedative in its character relieves this.

Antikamnia and Salol Tablets

2½ Gr. Antikamnia, 2½ Gr. Salol.

The value of the salicylates has long been recognized in the varied forms of rheumatic troubles. Salol is salicylic acid and carbolic acid in combination, and is the most approved form of exhibition.

In combination with antikamnia the excellence of both is maintained, whether the results sought are, the relief of pain or the internal antiseptic effect.

Antikamnia, Quinine and Salol Tablets

2 Gr. Antikamnia, 2 Gr. Sulph. Quinine, 1 Gr. Salol.

This combination has been so successfully exhibited in many disorders, where each and all are indicated, that the manufacturers have been induced to prepare it in tablet form for purposes of general supply. The profession will readily recognize that no new therapeutical claim is made hereby; but that the making of these tablets is simply to offer in an acceptable and convenient form, the means of exhibiting a combination already well approved.

On receipt of professional card The Antikamnia Chemical Company, St. Louis, Mo., will be pleased to send, free of charge, samples of each of these valuable combination tablets, also full literature pertaining to the same.

In Pneumonia, where there is restlessness

R Antikamnia (Genuine)..... ʒ ii
Syrup Doveri..... ʒ iii
Tinct. Digitalis..... ʒ iss
Teaspoonful every 3 to 6 hours.

In Painful Dysmenorrhœa

R Antikamnia (Genuine)..... ʒ j
Brom. Potass..... ʒ ij
Elix. Simplex..... ʒ ij
M. Sig.—One or two teaspoonfuls every hour in water.—*N. Y. Med. Journal.*

LISTERINE. THE STANDARD ANTISEPTIC.

LISTERINE is to make and maintain surgical cleanliness in the antiseptic and prophylactic treatment and care of all parts of the human body.

LISTERINE is of accurately determined and uniform antiseptic power, and of positive originality.

LISTERINE is kept in stock by all worthy pharmacists everywhere.

LISTERINE is taken as the standard of antiseptic preparations: The imitators all say, "It is something like LISTERINE."

LAMBERT'S
LITHIATED
HYDRANGEA.

A valuable Renal Alterative and Anti-Lithic agent of marked service in the treatment of Cystitis, Gout, Rheumatism, and diseases of the Uric Diathesis generally.

DESCRIPTIVE LITERATURE UPON APPLICATION.

LAMBERT PHARMACAL COMPANY, ST. LOUIS.

A New Package:

Fairchild's Essence of Pepsine.

For the convenience of prescribers—in response to expressed wishes, **Fairchild's Essence of Pepsine** is now offered in

4 oz. vials, retail price, fifty cents.

We regret that experience constrains us to warn physicians against fraudulent and inferior imitations of this preparation, which under cover of prescription are foisted upon the patient. The prescriber is therefore respectfully requested, in case of any failure in result or dissatisfaction, to examine the fluid dispensed.

FAIRCHILD BROS. & FOSTER,
NEW YORK.

BUFFALO LITHIA WATER

Disintegrates and breaks down Urinary Calculi, both the Uric Acid and Phosphatic Formation, and other Varieties as well.

ANALYSES AND REPORT BY DR. R. OGDEN DOREMUS

Professor of Chemistry in the Bellevue Hospital Medical College, New York.

NEW YORK, December 3, 1896.

*Dr. E. C. LAIRD, Resident Physician,
Buffalo Lithia Springs, Va.*

Dear Doctor :—

I have received the five collections of **Disintegrated Calculi**, each collection containing a number of fragments, and also the three boxes, each containing a single Calculus, mentioned in your letter as discharged by different patients while under treatment by the **BUFFALO LITHIA WATER, Spring No. 2**.

I have analyzed and photographed parts of each specimen, and designated them alphabetically.

One of Calculi from collection marked "A" was $\frac{3}{16}$ of an inch in diameter, of an orange color, and on section exhibited a nucleus surrounded by nine concentric layers of a crystalline structure. On chemical analysis it was found to consist of **Uric Acid** (colored by organic substances from the urine), with traces of Ammonium Urate and Calcium Oxalate. A fragment of a broken down Calculus from the same collection was found to consist of **Uric Acid**.

One of the fragments taken at random from the collection marked "B" which was still more disintegrated than the preceding one, proved on analysis to be composed chiefly of **Urid Acid** and Ammonium Urate, with a trace of Calcium Oxalate.

The contents of the boxes marked "C" consisted chiefly of whitish Crystalline materials. On microscopic examination they exhibited well defined and prismatic crystals, characteristic of "Triple Phosphate." On chemical analysis they were found to consist of Magnesium and Ammonium Phosphate (triple phosphate), Calcium Phosphate, Calcium Carbonate a trace, Sodium and Potassium Salts in traces, Uric Acid and Urates none, Calcium Oxalate none, Organic debris in considerable quantity, and matters foreign to Calculi.

The fragments of Calculi in the collection marked "D" were numerous, and of sizes varying from small fragments to $\frac{7}{8}$ inches in length, $\frac{3}{16}$ inches in width and $\frac{3}{16}$ inches in thickness. Some of the fragments were white and others were gray in color. On chemical analysis they were found to consist partly of the variety known as "Fusible Calculus," Ammonium and Magnesium Phosphate with Calcium Phosphate also, Calcium Phosphate, Calcium Carbonate in traces, Calcium Oxalate in traces, Uric Acid in traces and Organic matter.

The Calculus in collection marked "E" were nodulated and nearly spherical in shape, consisting of Crystalline layers from $\frac{3}{8}$ to $\frac{1}{4}$ of an inch in diameter. They were of a brown color, and on analysis were found to be chiefly Uric Acid, with some Ammonium Urate and traces of Organic matter.

Yours respectfully,

Analyses F, G and H, omitted for lack of space.

R. OGDEN DOREMUS.

Water in Cases of One Dozen Half-Gallon Bottles, \$5.00. F. O. B. Here.

SOLD BY ALL FIRST CLASS DRUGGISTS.

THOS. F. GOODE, Proprietor, - - Buffalo Lithia Springs, Va.

DANIEL'S Conct. Tinct. Passiflora Incarnata

Few remedies in the history of medicine have obtained such phenomenal popularity in the short space of a few years as **Passiflora Incarnata**. It first came into prominence as a remedy for tetanus in veterinary practice, for which, on investigation, it was found to be a specific. Many physicians began experimenting with the remedy in other cases. It was but a short step from tetanus to spasms and Passiflora again scored a signal success—5 to 15 drops four times daily. Further experiments along the line of nervous diseases demonstrated its wonderful value in the convulsions of children, in spinal meningitis and in chorea—5 to 30 drops. But Passiflora's great triumph was yet to come. As clinical reports of its use in various nervous maladies accumulated here and there, one could find it mentioned incidentally, that the patient had "passed a very restful night," "had slept soundly and was refreshed the next morning," etc. "A hint to the wise" being sufficient, physicians began using it for stubborn cases of sleeplessness, when, in teaspoonful doses, they invariably found that it brought a sweet, refreshing slumber; that the patient felt brighter the next day; that no untoward after-results were discernible; that it was not necessary to gradually increase the dose to obtain this result. This deep, quiet repose and refreshed feeling on awakening is vastly different from the heavy, lethargic stupor and dulled sensibilities and nausea on awakening, so characteristic of morphine and narcotics generally.

In several cases on record it has been shown that Passiflora, in teaspoonful doses, has power to quiet the delirium, to produce sleep and to check the intense craving for stimulants, incident to the different stages of delirium tremens. Many physicians have testified to its value in typhoid and other fevers, to control restlessness and induce a natural, restful sleep; also for the nervous disorders of infants during dentition.

Passiflora is usually employed in the Conct. Tinct. (**Daniel's**) 5 to 60 drops. One teaspoonful repeated in half an hour, if necessary, is the usual dose for sleeplessness.

Prepared by JNO. B. DANIEL, 34 Wall Street, Atlanta, Ga.

FOR SALE BY

PHILADELPHIA:
Smith, Kline & French Co.
Shumaker & Busch.

NEW YORK: C. N. Crittenton.
McKesson & Robbins.

CHICAGO: Fuller & Fuller Co.
Morrison, Plummer & Co.

RICHMOND: Purcell, Ladd & Co.

BALTIMORE:
Gilpin, Langdon & Co.

WRITE FOR LITERATURE.



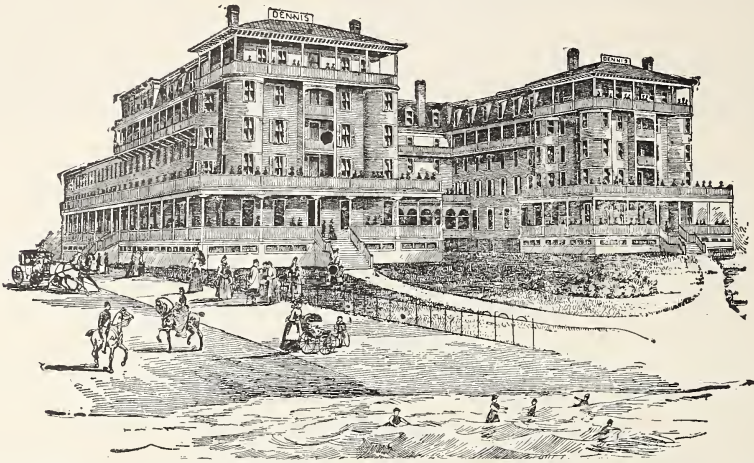
PHYSICIANS
Prescribe

WITH
BEST RESULTS



*Only when a superior preparation like
TEUTONIC is used—
When a malt extract is indicated **TEUTONIC**
will be found to stand all chemical tests as
thousands of physicians affirm.*

S. LIEBMAN'S SONS BREWING
36 FOREST ST. — BROOKLYN, N.Y. CO.



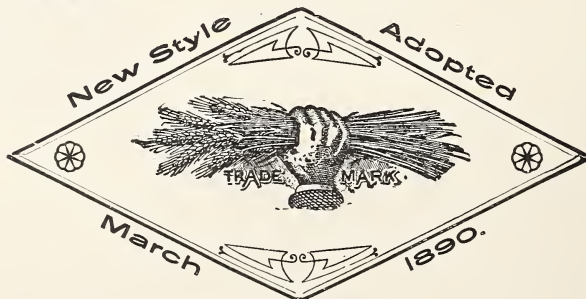
HOTEL DENNIS, Atlantic City, N. J.

All modern improvements. Rooms single or en suite, with Bath and Parlor. Sea Water Baths in House—Hot and Cold. Elevator arranged so Invalids can take Chairs from their Rooms.

SEND FOR
CIRCULARS.

Joseph H. Borton, PROPRIETOR.

DUKEHART'S Pure Extract of Malt and Hops.



NON-ALCOHOLIC.

This Malt is not a BEVERAGE, but a MEDICINE, a tablespoonful and a half being a dose; about 16 doses to the bottle. Is the best galactagogue known.

THE DUKEHART COMPANY,

BALTIMORE, MD., U. S. A.

THREE NEW IODINE COMPOUNDS.

Are receiving the unqualified indorsement of leading medical authorities of America and Europe, and are being regularly used by them in preference to Iodoform and the many other substitutes for it.

NOSOPHEN
(Tetraiodophenolphthalein)

SUPERIOR IN EFFICACY TO IODOFORM.

Possess strong antiseptic properties, Do not liberate Iodine, and are non-poisonous, non-irritant, tasteless, **AND ODORLESS.**

Distinguished for its remarkable desiccative action, and does not cake or form crusts when applied to wounds. Possesses exceptional healing properties. Indicated as a dusting powder in wounds of all kinds. Is unequaled in abraded surfaces, like burns, etc.; in abscesses and ulcers of all kinds; in affections of the skin; venereal affections, etc. Being a very light and impalpable powder, it can be very finely diffused, whereby the article is rendered especially valuable for eye, ear, nose and throat practice.

ANTINOSINE
(The Sodium Salt of Nosophen)

Is distinct from most antiseptic products in being readily soluble in water, by virtue of which it is especially adapted in solution as an antiseptic wash in all cases where such is indicated, and as a gargle; gives excellent results in ear, nose and throat practice; for irrigations of the bladder in cystitis, etc.; as an injection in gonorrhoea, etc. Is also employed very successfully as a dusting powder where very strong antiseptic action is desired.

EUDOXINE
(The Bismuth Salt of Nosophen)

Is intended for internal use as a gastric and intestinal antiseptic, and as such has given better results than any other known remedy.

Free samples and literature on application, of any one or all of these products.

SOLE AGENTS FOR THE UNITED STATES AND CANADA,

STALLMAN & FULTON, 10 Gold Street, NEW YORK.

IN PHYSICAL DIAGNOSIS YOU WANT

“The Ampliphone.”

“The Ampliphone.”

An instrument designed for the purpose of transmitting with accuracy the sounds incident upon the functional activity of the organs contained in the thoracic and abdominal cavities. It is constructed upon strictly scientific acoustic principles, is very simple in its mechanism, will exclude all extraneous sounds, is small in size, and weighs but 2½ ounces.

The ringing, tinkling sound, ever present in other instruments for a like purpose and so annoying to the physician, is entirely absent, the throb of the heart and the pulmonic murmur, so often confused, are heard separate and distinct in the “Ampliphone.”

Price, in Fine Morocco Case, reduced to \$5.50.

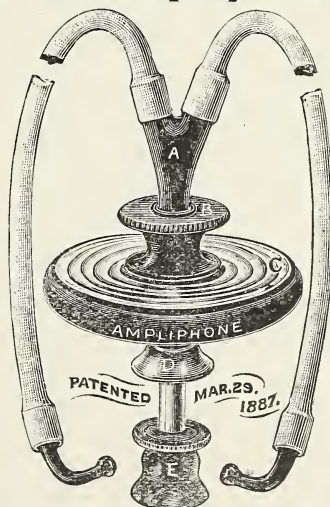
Sent by Mail Postpaid upon Receipt of Price.

SUPERIOR to the PHONENDOSCOPE.

ONE DOCTOR CALLS IT THE NEW ALLY OF THE ROENTGEN RAYS IN MEDICAL PRACTICE.

THE NORWICH PHARMACAL COMPANY, SELLING AGENTS, Norwich, N. Y.

NEW YORK OFFICE, 140 WILLIAM ST.
BOSTON OFFICE, 620 ATLANTIC AVE.



a.—Y-piece to insert in socket b. c.—Top diaphragm. d.—Bell for ordinary use. e.—Extension piece for deep pressure. NOTE.—The best results in ordinary cases are secured without the extension piece.

"WELL PREPARED!! NUTRITIOUS!! EASILY DIGESTED!!"
 HIGHEST AWARDS WHEREVER EXHIBITED THE WORLD'S COLUMBIAN COMMISSION.

IMPERIAL GRANUM

THIS STANDARD PREPARED

FOOD

IS EARNESTLY RECOMMENDED as a most reliable FOOD for INFANTS, CHILDREN and Nursing-Mothers;—for INVALIDS and Convalescents;—for Delicate and Aged persons. It is not a stimulant nor a chemical preparation; but a PURE, unsweetened FOOD carefully prepared from the finest growths of wheat, ON WHICH PHYSICIANS CAN DEPEND in FEVERS and in all gastric and enteric diseases. It is easily digested, nourishing and strengthening, assists nature, never interferes with the action of the medicines prescribed, and IS OFTEN THE ONLY FOOD THE STOMACH CAN RETAIN.

SEEMS TO HOLD FIRST PLACE IN THE ESTIMATION OF MEDICAL OBSERVERS.—*"The Feeding of Infants," in the New York Medical Record.*

A good and well made powder of pleasant flavour. CONTAINS NO TRACE OF ANY IMPURITY.—*The Lancet, London, Eng.*

A valuable aid to the physician in the treatment of all the graver forms of gastric and enteric diseases.—*The Prescription.*

As a food for patients recovering from shock attending surgical operations IMPERIAL GRANUM stands pre-eminent.—*The International Journal of Surgery, New York.*

Not only palatable, but very easily assimilated.—*The Trained Nurse, New York.*

IMPERIAL GRANUM is acceptable to the palate and also to the most delicate stomach at all periods of life.—*Annual of the Universal Medical Sciences, Philadelphia, Penna.*

Highly recommended and endorsed by the best medical authorities in this country.—*North American Practitioner, Chicago, Ills.*

It has acquired a high reputation, and is adapted to children as well as adults—in fact, we have used it successfully with children from birth.—*The Post Graduate Journal.*

The results attending its use have been very satisfactory.— * * * M.D., in *New York State Medical Reporter.*

Especially valuable in fevers, and often the only food the stomach will tolerate in many gastric and enteric diseases.—*Dominion Medical Monthly, Toronto.*

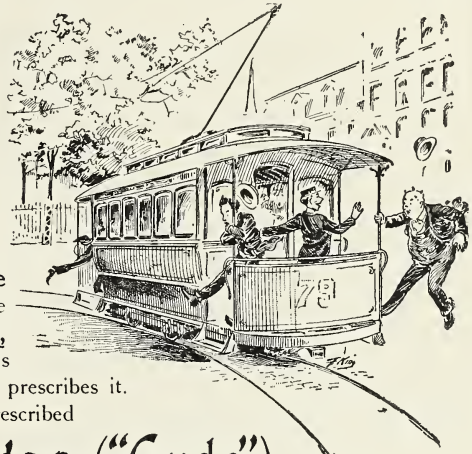
IMPERIAL GRANUM has stood the test of many years, while many competing foods have come and gone, and have been missed by few or none. But it will have satisfactory results in nutrition far into the future, because it is based on merit and proven success in the past.—*The Pharmaceutical Record, N. Y.*

★ 'Physician's-samples' sent free, post-paid, to any physician—or as he may direct. ★

JOHN CARLE & SONS, Wholesale Druggists, 153 Water Street, NEW YORK CITY, N. Y.

Hold Fast

TO THAT WHICH IS GOOD!



WHEN a Physician learns by experience that a certain remedy produces positive results, he becomes familiar with its indications, limitations and therapy, and therefore wants no substitute or make-shift dispensed when he prescribes it.

When a Physician has for a long time prescribed

Pepto-Mangan ("Gude")

AS A BLOOD BUILDER IN

Anæmia, Chlorosis, Rickets, Amenorrhœa, Dysmenorrhœa, Chorea, Bright's Disease, &c., he knows by experience that it is a standard of therapeutic worth and wants no other.

BUT SOMETIMES THE PATIENT DON'T GET IT, DOCTOR!

To assure the proper filling of your prescriptions, order Pepto-Mangan "Gude" in original bottles.

IT'S NEVER SOLD IN BULK.

M. J. BREITENBACH COMPANY,

Sole Agents for United States and Canada.

56-58 WARREN ST., NEW YORK.

LABORATORY:
LEIPZIG, GERMANY

EXALGINE.

AN IDEAL ANALGESIC.

Dr. T. D. SAVILL (London) considers that in Exalgine we have a valuable analgesic prompt and efficacious, and without any of the deleterious after-effects observable in some of the other drugs belonging to the same chemical group, but one in which the dose may require to be occasionally increased if the drug is to be continued for a long period.—*Lancet*.

A peculiarity of this remedy is that it frequently cures permanently diseases for which it was given to relieve the pain alone. In

INFLUENZA

Exalgine has, according to Drs. GORODICZE and SALAMANCA, relieved the cephalalgia when morphine and other drugs had proved useless. In

NEURALGIA

DR. T. FRASER has never failed to cure permanently all cases of facial neuralgia. WEISMAYER says that it relieves neuralgia most rapidly. YOUNGER tried Exalgine with the greatest success in various kinds of neuralgia, and also in epilepsy and insanity. In

CHOREA

DRS. LOWENTHAL of Berlin, and DANA of New York, report its successful use. DR. MONCORVO has in some cases of chorea found it to act as a specific. JORIS applied it in one case after all other remedies had failed, with great success.

Sample and literature free, on application to

McKESSON & ROBBINS, New York.

RESINOL

(R: *Unguentum Resinol.*)

An absolutely reliable

Anti-pruritic, Local Antipyretic,

Emollient and Skin Nutrient.

RESINOL, by promptly dissipating capillary hyperæmia, has established itself as the best local application in Erysipelas and other forms of Dermatitis, and as the remedy *par excellence* in all eruptions and irritations of the skin, as *Eczema, Herpes, Aene, Psoriasis, Seborrhæa, Tinea Capitis, Inertrigo, Sunburn, Eruption of Poison Oak, Burns and Scalds, etc.* Stops the itching of *Pruritus Ani* or *Vulvæ, Itching Piles, Marginal Eczema, etc.*, instantaneously, and immediately subdues the fiery inflammation of *Vulvitis, Balanitis, etc.*

RESINOL is a harmless antiseptic and a true skin anæsthetic, absolutely non-irritant and non-toxic (free from lead, mercury, or cocaine), can be applied to mucous, excoriated or denuded surfaces of any extent at any age without fear of untoward results, and is not contra-indicated by any internal medication that may be deemed advisable.

OPINIONS FROM THE PROFESSION.

From H. S. CUNNINGHAM, M. D., *Prof. of Gynecology and Clin. Dis. of Women, Amer. Med. Col., Indianapolis, Ind.*: "I have been delighted with the action of RESINOL in *Pruritus Vulvæ, Tinea Capitis, etc.*"

From F. G. WELCH, M. D., *New York City*: "For Senile Eczema, especially with *Pruritus*, RESINOL is the best application I have found in twenty-five years' practice."

From W. J. BRANDT, M. D., *Brooklyn, N. Y.*: "Surely in your preparation, RESINOL, you have a most wonderful antipruritic remedy. I have used

it upon myself and my relief has been complete and absolute."

From E. S. HOYT, M. D., *Specialist, Rectal Diseases, New York City*: "RESINOL is one of the best local anti-phlogistic remedies I have ever used. It subdues the intense inflammation in Strangulated Hemorrhoids in a very short time."

From H. S. DWIGHT, M. D., *Philadelphia, Pa.*: "In the various skin affections arising from high temperature in mills where operatives are exposed, I have found RESINOL admirable. I have also used it with good results in Chafing, Scrotal Eczema and Vulvitis."

RESINOL is put up in one ounce jars at 50 cts. each, and can be obtained at any drug store.

Sample sent free on application, or one regular size jar for trial on receipt of 25 cents.

RESINOL CHEMICAL CO., Baltimore, Md.

MARYLAND MEDICAL JOURNAL

A Weekly Journal of Medicine and Surgery.

VOL. XXXVI.—No. 21. BALTIMORE, MARCH 6, 1897. WHOLE No. 832

Original Articles.

SHOULD PHYSICIANS BE PAID FOR RETURNS OF BIRTHS, DEATHS AND DISEASES?

READ BEFORE THE CONFERENCE OF HEALTH OFFICERS, HELD AT BALTIMORE, FEBRUARY 17 AND 18, 1897.

*By George H. Rohé, M. D.,
Baltimore.*

THE following considerations seem to me applicable in the discussion of this question:

Has the State, directly, or through the health department, the right to demand services from physicians without rendering compensation?

The right of the State to demand from any citizen certain services for the public good is inherent in what is comprehensively known as the "police power."

One phase of the exercise of this "police power" is the enactment of certain laws regulating the practice of medicine. In this State, for example, no person may practice medicine or surgery without passing an examination before an examining board appointed by the State. Persons found by the board incompetent are debarred from practicing this profession within the limits of the State. Some have held that the exercise of this power by the State was contrary to the letter or spirit of the Constitution, but courts have generally decided that this contention is not valid, and that the State, by virtue of the police power, can restrict the privilege of its citizens in this direction.

So, also, courts have held that under the authority of the same police power,

physicians can be compelled to report to the legally designated authorities the facts connected with deaths occurring within their observation. Similar decisions are on record relating to the reports of contagious or infectious diseases.

It may be assumed without argument that laws requiring the reports of diseases and deaths are for the public good. Conceding this, any citizen may be required to make such report. As physicians, by virtue of their professional knowledge, are the only persons who can give correct information, it is proper that the State should require them to make the report. Contrary to the opinion sometimes expressed, the State can demand such service without compensation. A Connecticut court has declared that "it is universally understood to be one of the implied and necessary conditions upon which men enter into society and form governments, that sacrifices must sometimes be required of individuals for the general benefit of the community, for which they have no rightful claim to specific compensation." (*Bradley vs. N. Y. & N. H. R. R. Co.*, 21 Conn., 306.)

It is conceded that the State has no right to take private property without

granting compensation, but it is doubtful whether a physician's knowledge or service in this particular would be considered as property. Indeed, courts are often disinclined to allow specific compensation for the special knowledge required of an expert called by the State in criminal cases.

The report of deaths and contagious diseases should be considered by the physician as a high public duty; one that he alone can satisfactorily perform, and for which he should scorn to ask or receive compensation.

Another aspect of the question of the report of contagious diseases is whether such report by the physician is a violation of professional confidence. Aside from the fact that State laws generally do not recognize the physician's knowledge gained in a case as a question of professional privilege, it seems to me that the principle does not apply here. The privilege to suppress knowledge of the existence of an epidemic disease which may, if not prevented, devastate a community, ought to be abridged. Suppose, for example, a case of bubonic plague, now raging in the East, were to succeed in evading quarantine, and come under the notice of a physician acting in his professional capacity in this city or State. Would any consid-

eration of professional secrecy justify him in suppressing the information, and thus subjecting the community, nay, the entire country, to the danger of infection by this pestilence?

And if the exotic plague can be reported without a violation of professional confidence, why not our domestic pestilences, scarlet fever, measles, diphtheria, whooping cough or typhoid fever? I believe the common sense of physicians will unhesitatingly reject the view that the report of contagious diseases is a violation of professional confidence.

There remains to consider the duty of physicians as reporters of births occurring under their care. The law in this and in a number of other cities requires them to make such reports. I am, and always have been, of the opinion that the law is unjust, and that it places a burden upon persons who should not bear it. The report of births and the calculation of the birth-rate of a community is not a medical or sanitary question at all. It is a question in demography. Let the parents of the child make the return to the bureau of vital statistics. The doctor, as well as the midwife, should be relieved of all responsibility in connection therewith.

CHLORALOSE.

CHLORALOSE is said to be a combination of chloral with glucose and is recommended as a safe hypnotic. Dr. James Tyson records his experience in the *University Medical Magazine* with it. In several instances it caused a kind of mania, in one case associated with great violence. He concluded that his doses were too large. He gave in one case five grains, which were repeated in a short interval without his permission.

From three to five grains he now considers the proper dose. It should be given preferably in solution, because the powder may lie undigested in the stomach, thus causing a repetition of the dose, and the first dose acting conjointly

may cause unfavorable results. It is readily soluble in hot water, but may better be taken dissolved in hot milk by those who can stand hot milk. It is best used in the simple insomnias and has been used with success in insane asylums. It acts, as a rule, promptly and the after-effects are usually not unpleasant.

* * *

AN INGENIOUS METHOD OF VAGINAL IRRIGATION.

THE *Medical Record* relates the case of an ingenious woman who, weary of wetting the bed in giving herself vaginal irrigations, hung a hammock in her bedroom, put a tub under the hammock, lay down and irrigated until the water gave out.

VITAL STATISTICS.

By Charles L. Mattfeldt, M. D.,
Catonsville, Md.

READ BEFORE THE CONFERENCE OF HEALTH OFFICERS, HELD AT BALTIMORE, FEBRUARY 17 AND 18, 1897.

MY consideration of this subject is due to the absence of any means of collecting accurate vital or mortuary statistics from the counties of Maryland so as to enable the superintendent of vital statistics to collect and compile them as to make them of practical use. I consider nothing more important to a State or community than this. In Baltimore County we are not compelled to keep a record of births nor issue a death certificate unless the deceased is to be buried in one of the cemeteries in the limits of Baltimore City or unless death is due to contagious disease, in which case we are requested to send notice to the Secretary of the State Board of Health.

Under such a lax system how can the Superintendent of Statistics give any accurate information as to the prevalence of certain diseases in his community? Before going into details as to what I consider are the most important statistics and how, in my judgment, they can be collected, I wish to call your attention to the danger of not having suitable laws regulating the burial of bodies in the counties. I particularly wish to remark with what ease a body can be disposed of and to emphasize my remarks and bring them more clearly before you, will relate two suspicious cases which occurred in my county and which doubtless would have been investigated had they taken place in the city.

Some years ago a carriage stopped before the residence of a midwife and a woman was removed from it and carried into the house. A physician from Baltimore City visited her and in about one week she died and was buried, the utmost secrecy being maintained, no one knowing from what she died. The second case was an infant which died without medical attention, the parents reporting pneumonia. The body was

buried and nothing was thought of it as no burial permit was required. Some months later I was asked several pertinent questions by the mother of the child and from these drew deductions that the child had been smothered to death with a pillow. Several physicians of Baltimore City have alluded to this danger and were surprised that in the enlightened age in which we now live such a state of affairs should exist, especially in such close proximity to a large city.

Pardon me for this transgression and I now will proceed to consider what in my estimation are the most important statistics required for health purposes and how best to accomplish them.

1. The annual mortality, the causes of death and the mean ages at death.

These facts could be obtained by the adoption of a certificate of death similar to the one issued by the Health Department of Baltimore City (but of more convenient size, so as to enable one to carry it in the pocket, if necessary), making it the duty of the physician who attended the deceased during his or her last sickness, or the coroner, when the case comes under his notice, to furnish within twenty-four hours after the death to the undertaker or other persons superintending the burial, a certificate setting forth, as far as can be ascertained, the full name, sex, age and condition (whether married or single) of the person deceased, and the cause and date of death, also duration of last sickness, and it shall be the duty of the undertaker, or other person in charge of the burial of such deceased person, to state in the certificate the date and place of burial and having signed the same to forward it to the local health officer within twenty-four hours and that no interment of the dead body of any human being or disposition thereof in any

tomb, or vault, or cemetery, shall be made without a permit therefor, granted by said officers, and that said officers shall keep a record of such certificates and forward a copy of same every six months to the Registrar of Vital Statistics.

2. The births to population and the relative number of live and still-born children.

To accomplish this and also to make it more difficult to conceal cases of infanticide, it should be made compulsory on any physician, midwife, or other person in charge, who shall attend, assist, or advise at the birth of any child in said county, to report to the local health officer, stating distinctly the date of birth, sex and color of the child or children born, its or their physical condition, whether still-born or not, the full name, nativity and residence of the parents. The local health officer should also keep a record of these facts and forward a copy of them every six months to the Registrar of Statistics.

The importance of registration of births no one will deny. These records could be used as evidence in legal disputes involving questions of birth as to time and circumstances, such as legitimacy or illegitimacy of children and right of suffrage because of age or nativity. In my own experience I have enabled several widows to receive pensions who would perhaps not have received them, or have been unnecessarily delayed by want of evidence as to death of husband and birth of minor children, my private record being taken as evidence in such cases, especially as to ages of minor children, and, in fact, no other existed, as in several of these cases the parties not being able to write and did not even keep a record of such facts in their family Bible, which, I believe, is the family record book in the counties.

3. The annual rate of increase of population. This is no doubt the most difficult of all to procure. The census of population in the counties being taken every ten years only, to arrive at the annual increase from this must of necessity be extremely difficult; to procure such returns annually would be

well-nigh impossible, owing to the great amount of money required to accomplish it, as we have no police force sufficiently large to take a census as is done in Baltimore.

4. The amount of sickness to population. To secure data showing prevalence of various diseases is quite a difficult task, unless it should be made compulsory on physicians to report them to the proper officers.

In 1895, Dr. James A. Steuart, the then Registrar of Vital Statistics, attempted this by issuing prepared postal cards accompanied by a circular letter requesting physicians to fill out the cards and forward them to him, but with what success you can best learn by perusing the report of the State Board of Health for that year.

My plan of accomplishing this would be for the State to furnish every physician with a prepared record book in which to keep a record of his cases, which I think he would do for his own personal edification, as well as for the benefit of the State at large, and that he be required to forward a copy of this record on prepared blanks every six months to the Registrar of Vital Statistics. If the foregoing could be accomplished, I think the Registrar could so tabulate what he received as to make them of some practical use; while not as complete as could be desired, still this would be far better than what we now have. I ask you to give this subject your earnest consideration and by requesting the next Legislature to enact such laws that will enable the Registrar to collect and tabulate these statistics in such form as to make them a source of information for those interested in the health and welfare of our State.

An accurate record of such statistics is a great aid to the hygienist, who can, by glancing at the records, determine the health of a town or its neighborhood, trace the fatality of epidemics, ascertain the proportion of deaths to the whole population and the efficiency of preventive measures, and I as one individual will do everything in my power to assist in bringing about these results.

PERSONAL AND DOMESTIC PROPHYLAXIS.

READ BEFORE THE CONFERENCE OF HEALTH OFFICERS, HELD AT BALTIMORE, FEBRUARY 17 AND 18, 1897.

By John D. Blake, M. D.,

Professor of Operative and Clinical Surgery, Baltimore Medical College.

PERSONAL and domestic prophylaxis presents such an enormous scope, and the time placed at my disposal to prepare for its proper discussion so short, that I almost shrink from the task imposed.

To properly treat so important a subject one should be a thoroughly equipped bacteriologist, a competent pathologist, a good sanitarian, a professional chemist, and a competent engineer. It goes without saying, therefore (as I do not pretend to claim any such equipment), that these subjects can only be very feebly treated by me on this occasion. What I shall say, therefore, will be along the line of personal experience, with practical suggestions as to the proper method of dealing with contagious diseases.

In the earlier days of hygiene when the cause of disease was less understood and the whole subject was in its infancy, it was thought a much more easy task to successfully deal with it than now. As bacteriological investigations go on, the more intricate and difficult does the subject become, and naturally so, because we find such a large per cent. of our cases which suffer from contagious diseases, so environed as to make the difficulties and obstacles which we find in our pathway to successful scientific treatment quite insurmountable.

The first obstacle, as a rule, with which we have to contend, is an uneducated and selfish laity. How often is it the case that we find it practically impossible to impress those having charge of contagious cases with the importance of isolation and disinfection. I am of the opinion that proper isolation and disinfection can never be successfully done in private practice until the laity is properly educated upon this point. To set out to accomplish this I

am convinced is not only our first and imperative duty, but a herculean task. You will doubtless say, "Yes, that is all so, but how shall we ever be able to accomplish such a desirable result?" My answer is, by precept, by example, and by law; and, I assure you, the last must not be the least.

How often is it the case that the physician on visiting a case finds the following condition of things to exist: A family composed of father, mother and four small children, in a tenement house, with but four rooms, parlor, kitchen and two bedrooms, at their disposal. Father at work, one child has diphtheria, the baby is still at the breast; the physician is informed that they are not able to employ a nurse, or even such assistance as would enable them to isolate the sick, and under no condition would they think of permitting their child to be taken from home to a hospital for contagious diseases, in the absence of a law compelling it to be done. Here is an environment, here is a picture, which I am sure is familiar to you all, and one which presents to the physician in charge such absolutely insurmountable difficulties that his heart fails him at once, and he says, I can only do the best I can, and what can he do; with the mother as nurse to the sick child, and nurse to the baby, cook, chambermaid, and last, but not least, disseminator of disease and death throughout the house and district in which she lives?

The difficulties in the way of isolation and disinfection here are so great, that the doctor only makes a faint effort at pretending to introduce, much less enforce, any such thing.

This should not be, and if the poor mother could be made to appreciate the fact that she was likely carrying around the house a concealed dagger, with

which she was putting to death one after the other of her loved ones, things might be vastly improved upon.

We should not only advise them, but insist on complete isolation. Parents have no more right to expose their own children to the contagion of disease, than they have to expose those of others to it, and I am sure there are none who would permit another to enter their home and mingle with their children under such circumstances, if they knew it.

The next most formidable obstacle which city physicians find in their way to isolation is the overcrowding in tenement houses and private families of large proportions, who are, by reason of poverty, forced to occupy small and unsanitary dwellings; it is here that the physician finds himself completely handicapped.

It may sound very strange to our rural members to hear that in cities especially, as Dr. Huntington says, we have unfortunately to deal with a civilization which overtakes and underpays wage-workers in order to add superfluous affluence and irresponsible power to the estates of the few; a civilization which helps a hundredth part of the population to own half of the property; a civilization which exposes innumerable women and children to moral ruin for a living, which drives pale, emaciated and rickety children daily from pestilential tenements to factories and stores; a civilization which countenances an owner of real estate who has pocketed millions of dollars by the rental of a dozen or more nests of misery and dens of vice five or six stories high; a civilization which lets thousands of children die within a year after they are born, in these cellars and garrets, without uttering a sound of indignation or regret; which robs the individual of his or her independence, enslaving them, by fear of want, to landlord and employer; this, truly, is not a civilization for any conscientious and well-thinking people to be proud of.

Dr. Homan of Missouri, in speaking of overcrowding in cities, says that one of the conditions incident to it is a very

high birth rate; this he attributes to an effort on the part of nature to meet the enormous waste of life, so that a margin may remain to prevent complete extinction, but he protests that the vital and moral quality of offspring thus produced gravely endangers society.

We all know that in cities tenement districts are known to the police officials as nurseries of crime, and are known to the sanitary authorities as breeding places of disease, and it has time and again been demonstrated that overcrowded tenements are foci of epidemic-contagious diseases which when once started cannot be stamped out until they have spread from poor to rich, and from district to district.

Thus it will be seen that natural laws cannot be successfully violated; if the rich and selfish oppress the poor and ignorant, they will surely have their reward, for, if in no other way, they will be rewarded by a visitation of contagious disease directly traceable to the sources above named, and from which they and a whole community cannot escape.

Hence it is a question of vital importance not only to the medical profession, but one which should actively interest the whole community. The laws now on the statute books bearing upon this question, in my judgment, are lamentably deficient, in that they deal only with the patient and his environment, and absolutely fail to apply to those who would and do make such environment possible.

You may build contagious disease hospitals; you may appoint sanitary officers — both of which are highly commendable things to do — but you will never stamp out contagious diseases until some law is passed by which men are restrained from building new or converting old, dilapidated buildings into tenement houses, into which men, women and children are crowded *ad libitum et ad infinitum*, without the least restriction or requirement.

Men who for the sake of the almighty dollar feel called upon to dot the city over with these dens of vice and incubators of disease should be made to

know that they would be held strictly to account for the results of their labor.

My opinion is that if the people fully appreciated the importance of this question, popular sentiment would be so strong against it, that it would take a brave man indeed who would undertake to locate one in any community, whether the inhabitants thereof be rich or poor. Here, then, is the field for practical work on the part of the profession in teaching the rich, poor and ignorant as to their duty in the premises.

If it is proposed to locate a contagious disease hospital, or a hospital for any purpose, in any part of the city, people for squares around will set up a hue and cry as if a wolf were at their very door, although they were equipped with all the latest improvements and manned by the most intelligent physicians and trained nurses.

Yet some irresponsible individual will locate a tenement house in some alley or lane, at the very back gate of some of these people, which would be a thousand times more dangerous, and not one word of complaint is heard from them or those in the immediate vicinity. To what is this due? The only answer is, ignorance.

If the people could be educated up to a point where they could fully appreciate the danger of these pest-houses, their attitude toward them would be different, and I doubt whether one could exist in any community.

I would advise the enactment by the proper authorities of a Public Health Law, as follows: The first section of the act should regulate and prescribe the conditions upon which a permit could be issued for the erection or remodeling of any building which is to be used as a tenement, and the work should be done under the supervision of the health officer and the corporation's engineer and building inspector.

Another section should give the health officer absolute power to prevent the overcrowding in small and badly constructed houses located in either street, lane or alley — a condition so prevalent

in this city today and one which is so fruitful of disease.

Another section should absolutely proscribe, under heavy penalties, the dens of misery, shame and death, known as infant boarding houses, so common in the lanes and alleys of the cities of our State, where infants are taken with the hope, if not almost the tacit understanding, that they are to be starved to death. This section should also make it a crime punishable by heavy fines and imprisonment, for the health officers to permit such houses to continue to exist, or the owners to rent or permit their houses to be used for such purposes, the infants in such cases being, for the most part, the offspring of working women and servant girls who pay paltry sums from their meager salaries for their support.

Another section, in addition to the law now existing which requires physicians to report the existence of contagious diseases, should be enacted, whereby the parent, guardian, or those in charge of the premises upon which contagious diseases exist, should be required, under penalty, to report promptly to the health officer the termination of the disease; upon the reception of such notice the health officer should be required to see that the house or any part thereof which, in his judgment, needs the same, should be properly and thoroughly cleansed and disinfected, and any articles therein contained should be subjected to the process of cleansing and disinfection, or complete destruction. This I consider one of the most important steps in the management and control of contagious diseases. It should, therefore, be done thoroughly and under the direct supervision of a competent physician.

I would therefore urge upon the authorities the importance of having the all-important and responsible positions of sanitary inspectors filled by physicians. It is not only unreasonable, but preposterous, to expect men who know nothing of bacteriology, or the effect of germs upon the system, to scientifically and successfully fill these important positions.

The present method of disinfecting is entirely too crude and commonplace. My opinion is that to properly and thoroughly disinfect a room all paper should be scraped from the walls, if papered, and carefully burned; if not, the walls should be scraped and afterward two coats of whitewash should be applied; the floor, washboards, doors, door frames, windows and window frames should be thoroughly scrubbed with water and concentrated lye, after which a coat of paint or varnish should be applied; all articles of furniture should be painted or varnished and all bed clothing, beds and other articles in the room should be subjected to sterilization by steam.

The law should also provide for an infectious disease hospital; (and I would say in passing that it is a burning shame that the earnest appeals of our faithful and efficient Health Commissioner for such a hospital have been so long disregarded by our municipal legislators;) it should also provide a suitable ambulance by which infectious persons could be transmitted to the hospital.

The law should be so framed that the authorities would have power, with the advice and consent of the family physician, and where it was clearly shown that isolation and disinfection were impossible at home and danger of contamination great, to remove such cases to the hospital, where, if they so desired,

the family physician could follow and continue in attendance upon the patient. This provision of the law, I think, would tend to greatly lessen opposition to it on the part of parent and physician.

In houses where such diseases have existed and the people moving out soon after the convalescence of the patient, the owner or agent should be restrained from renting the premises again until he had obtained a certificate from the authorities showing that the house had been properly disinfected and cleansed.

No auctioneer should be allowed to sell second-hand bedding or bed-clothes without the owner showing a certificate of the health authorities to the effect that no contagious disease had existed in the house from which they came.

It should also be a misdemeanor, punishable by fine and imprisonment, for any owner to sell bedding, bed-clothes, carpets, or any article of clothing to any second-hand dealer or other person, he knowing them to be from a house in which contagious disease did at the time or had recently existed.

It should likewise be a misdemeanor for any person to buy or expose any second-hand article of clothing for sale, without first obtaining a certificate from the health authorities as to their sanitary condition.

As there is to be a paper read before you on School Hygiene, I will not discuss that subject here.

IRREGULAR EATING.

THE editor of the *Medical Record* is a man who notes every-day facts in a very convincing manner. In talking of the Sunday penalty of irregular feeding, he says: An invitation to gastric disorders is issued every seventh day by ninety-nine per cent. of the people of this country. Once in seven days comes our so-called day of "rest"—the day on which the regular meals at morning, noon and night are replaced by a vicious system of late rising and abstinence, followed by gluttony. The gastric secretions know nothing of a seventh day

of rest. They are ready at the customary six-day morning-breakfast time, but no food comes to them and they are absorbed. A second period of the day comes and the same process is repeated, with the additional injury that from two to four hours after the customary meal the stomach is loaded unusually full of food, whereas the secretion is no longer there in sufficient quantity to digest it. The result is the regulation Sunday afternoon discomfort of gormandizing, with the accompanying absence of appetite for the evening meal. What wonder that next day is "Blue Monday!"

Society Reports.

CONFERENCE OF HEALTH OFFICERS OF THE STATE OF MARYLAND.

HALL OF THE MEDICAL AND CHIRURGICAL FACULTY OF MARYLAND.

HELD FEBRUARY 17 AND 18, 1897.

FIRST DAY, WEDNESDAY, FEBRUARY 17.
MORNING SESSION.

THIS first conference of physicians interested either officially or professionally in the promotion of sanitation in Maryland was the outcome largely of the efforts of Dr. John S. Fulton, the new secretary of the State Board of Health. There were present at the opening of the conference about seventy members and visitors representing the Johns Hopkins University and Hospital, the State Board of Health, the City Board of Health, the School Teachers' Association and the School Board of Baltimore. The morning session of the first day was opened at 11.20 by Dr. E. M. Schaeffer, the chairman of the Faculty's Committee on General Sanitation, at whose invitation the conference was held. He called the meeting to order and said: It has long been recognized by statesmen that the consideration of health is worthy of the first thoughts of the people and we are glad to be inaugurating here a meeting that has for its object the promotion of health and which begins under such favorable auspices, with delegates present from every county in the State. We are only too glad to welcome so many from the remote parts of the State and the more remote the more glad we are to see them. We have the co-operation of the Johns Hopkins University, the State Board of Health, the Health Department of Baltimore City, the School Board, the School Teachers' Association and we hope later to receive delegates from the Arundell Club. The question of vital statistics will be brought up for discussion and I will say just here that every one regards such statistics as the basis of sanitary reforms. They are to us as useful as book-keeping to the merchant; in fact,

it might be called sanitary book-keeping. Gentlemen, we shall have as our presiding officer today the Chief Executive of the State of Maryland and I now take great pleasure in introducing to you Governor Lowndes.

Governor Lloyd Lowndes, the honorary chairman, made the opening address, dwelling upon the importance to the State of the new movement for more active public interest in hygienic matters and congratulating Drs. Fulton and Schaeffer and those of the State and city health boards associated with them upon the success of their efforts. The hope was expressed that similar movements for hygienic advance would be undertaken in every county of Maryland. He then presented Dr. William Osler of the Johns Hopkins Medical School, to whom was assigned the address of welcome.

Dr. William Osler: Mr. Chairman and Gentlemen, it is no new thing for the ancient and honorable Faculty of Maryland to take an interest in health matters. If you look through its records for a hundred years you will find that it has always been the trusted adviser of the people of this State in all times of peril. Into the history of the part that has been played by the Faculty in health matters in this State time will not permit us to enter, but I may call attention to the fact that this is not the first conference that has been held under its auspices. From this society we speak in an authoritative manner to the people of the State and here in this hall matters may be discussed in reference to the health of all parts of the State and an organization should be fostered which will be recognized in all the different counties as the highest authority upon vital statistics and health.

It seems to me there are three or four things in which we should attempt to guide the public. The first is the re-organization of the State Board of Health; an organization on a basis that should have the counties as an essential element, so that in each county there should be a paid official of the State Board of Health, an officer not of

the county only, but of the State, and who should be paid by the State to take charge in his district of all matters relating to vital statistics and to health. An organization of that kind is really the ideal plan towards which we should work, but we cannot get it without first educating the public. There is no use in going to the legislature until we first go to the people and the people through the State should see that their representatives are fully made aware of matters relating to health and vital statistics.

The second relates to the lunacy laws. When I say that there are nearly five hundred insane people in the almshouses and jails of this State, I add that it is a reflection upon the intelligence of the people of Maryland. I say that because it is recognized the world over, that insane people must be taken charge of by specialists and must not be herded together in jails and almshouses. They are the children of the State and should not be cared for by the ordinary physician, who may be able to treat typhoid or scarlet fever well enough, but has no idea how to treat special diseases of the brain. I make no reflections upon the almshouses of this State, but I say that no physician who has not had special training is capable of treating lunacy properly. I might say also that it would save thousands of dollars to the State if all the insane were properly treated by specialists.

The third point is in relation particularly to the health of Baltimore. Baltimore needs a great deal, but it needs first proper milk inspection. In this city of half a million people we have no control over our milk supply. It is an essential element of the health of this city that the State and city health boards should have an active control in the inspection of every dairy that sends milk to Baltimore.

Another important thing is a hospital for infectious diseases. That is recognized as a necessity in every city and it will come here in course of time. A more important matter is the proper control of our water supply and that must be had at the earliest possible

moment. These questions may be discussed here and they will engage the attention of the Faculty for the next few years.

Dr. S. C. DeKrafft of Cambridge, President of the State Board of Health, then responded to the Address of Welcome. He claimed that lack of funds was the cause of the previous incompleteness of the statistical records of the Board and regretted the defectiveness of State laws, which permitted much loss of life that might be prevented. He hoped that this Conference may be fraught with great benefit to the State.

Dr. John S. Fulton of Baltimore then read a paper on VITAL STATISTICS. (See page 347.)

Dr. Charles L. Mattfeldt of Catonsville also read a paper on VITAL STATISTICS. (See page 367.)

Mr. Charles B. Rogers of Towson opened the discussion of the morning's papers. He thought that in securing reports of infectious diseases, public school teachers, apart from the doctors, should be required to send in to the School Commissioners monthly reports of all the cases of contagious diseases coming to their knowledge through association with the scholars (occurring in the scholars' homes or affecting the scholars themselves). The School Board should then communicate with the Health Board, coöperating with it for the public good.

Dr. F. H. Thompson of Annapolis thought that physicians did not send in reports because they were not paid for them. When he could get timely notices from epidemics he had several times succeeded in checking the epidemics.

Dr. A. K. Bond thought that more confidence in the health officer was needed. He spoke of the necessity for having physicians as inspectors and related his experience with drunken and ignorant inspectors.

Mr. H. G. Weimer of Cumberland, Public School Examiner for Allegany Co., said he had come two hundred miles to attend this Conference through his interest in the welfare of the nine thousand children who had

been committed to his care in recent years. All advance in domestic and school hygiene and in the control or prevention of infectious diseases works for the welfare of the children. He spoke later of the injustice of fining the county school teacher ten dollars for every unvaccinated pupil admitted. It sometimes deprived her of her living (so many families objected to the vaccination); yet the children continued as before unvaccinated, no effort being made directly to vaccinate them.

In reply to the statement of Dr. J. H. Billingslea of Westminster, Md., that the physician should be compelled to simply hand a blank report to the householder to fill up, because other physicians, jealous of him, would unfairly criticize any report he himself should send in—

Dr. August Stabler of Brighton, Montgomery Co., said that in country districts the householders were, many of them, incapable of filling out such a report in a manner satisfactory to the health authorities.

Dr. A. K. Bond then related a case in which the stools of a typhoid patient were thrown out and carried into Lake Roland to be distributed to the people of Baltimore.

Dr. T. A. Councill, health officer of Easton, said that the school teachers of Easton willingly reported to him cases of infectious disease. He thought that Easton would greatly advance in health matters.

Dr. W. J. Todd of Mt. Washington said that he also found the public and private schools very ready to cooperate with him in these matters, even to the extent of inspecting their throats for possible diphtheria in cases of epidemics.

Dr. E. T. Bishop, Smithsburg, said that he had found that his explaining to the family in the mountains that a case of disease was smallpox was followed by the community dispensing with his services during the duration of the case. The less publicity given to the diagnosis of such a case the better if the doctor wished to make a living out of medicine.

Mr. Charles Hartshorn of Brighton,

Montgomery Co., gave a description of the very satisfactory working of the local Board of Health of Olney District, at the quarterly meetings of which each member reported on the health of his neighborhood. A summary of these reports was then sent to the State Board of Health. He thought local boards of health were very desirable all over the State, and should be encouraged or established by our State board. Physicians would not hesitate to report to such a local board, while they would hesitate to make these matters more public. He thinks these local boards should be organized by districts, rather than by counties. In regard to the need of burial laws in the counties, he told of cases where, among the ignorant, even after warning of the danger from the physician, the parents had had large funerals with open coffins in diphtheria cases.

Dr. J. McP. Scott of Hagerstown spoke of the need of carrying out of vaccination in the county schools. He, as health officer, was determined to enforce the law, however great hardships it worked to teachers. He considered that the report of a physician that he had vaccinated, when he did not know whether the vaccine took or not, was useless.

Mr. Charles B. Rogers of Towson said previous vaccination of children must be reported and sworn to by teachers, in Baltimore county. He wished to know if the law could compel a child to be revaccinated after years; otherwise, was the child really protected?

Dr. Scott of Hagerstown thought the teachers were there for the purpose of teaching the children, not of examining scars or inspecting throats.

Dr. Owings of Ellicott City thought the subject of vaccination was very important. He thought vaccine physicians should go to the schools, vaccinate arms destitute of proper scars, and at a subsequent visit inspect those arms to see whether they had "taken."

Dr. W. A. Duvall of Baltimore favored local health boards, with paid medical inspectors of schools.

Dr. C. G. Stuart of Oxen Hill asked

who was to carry out (and enforce the penalty of) the State law requiring vaccination of all children under eighteen months of age. He thought the answer was, "a local State board." As local health officer he insists on the householders carrying out the law. He finds that when he writes to the State vaccine physician for virus he cannot get it. So other county physicians must be handicapped by lack of good vaccine.

The discussion was continued for quite a time, the members of the conference and numerous visitors to whom the courtesy of participation was extended manifesting the liveliest interest in the sanitary matters brought forward. A member, Dr. Mattfeldt, suggested that it would be well for the State Board to send suitably arranged record books for enumeration of infectious disease treated to those physicians in the counties who would consent to use them. From this source semi-annual statistics of value might be obtained.

Medical Progress.

PICRIC ACID IN BURNS. — D'Arcy Power, M. D., F. R. C. S., gives to the *British Medical Journal* his method of using picric acid in the treatment of superficial burns and scalds as follows:

The solution of picric acid is made by dissolving a drachm and a half of picric acid in 3 ounces of alcohol, which is then diluted with two pints of distilled water, or more accurately: Picric acid, 5 g.; alcohol, 80 g.; dissolve; add 1000 g. of distilled water. This is a saturated solution of picric acid.

The clothing over the injured part should be gently removed and the burnt or scalded portion should be cleaned as thoroughly as possible with a piece of absorbent cotton wool soaked in the lotion. Blisters should be pricked and the serum should be allowed to escape, care being taken not to destroy the epithelial surfaces. Strips of sterilized gauze are then soaked in the solution of picric acid and are so applied as to cover the whole of the injured surface. A thin layer of absorbent cotton wool is

put over the gauze and the dressing is kept in place by a light linen bandage. The moist dressing soon dries and it may be left in place for three or four days. It must then be changed, the gauze being thoroughly well moistened with the picric acid solution, for it adheres very closely to the skin. The second dressing is applied in exactly the same manner as the first and it may be left on for a week.

The great advantages of this method of treatment are: First, that the picric acid seems to deaden the sense of pain; and, secondly, that it limits the tendency to suppuration, for it coagulates the albuminous exudations and healing takes place under a scab consisting of epithelial cells hardened by picric acid. A smooth and supple cicatrix remains, which is as much superior to the ordinary scar from a burn as our present surgical scar is superior to that obtained by our predecessors, who allowed their wounds to granulate.

I have used this method for more than a year in hospital practice both amongst out-patients and in-patients and I have every reason to be thoroughly satisfied with the results I have obtained. It is not an ideal method, for it stains the clothes and discolors the hands of the surgeon, but it is a great improvement upon anything else I know of.

* * *
MAL-PRESENTATIONS. — A physician, writing to the *Medical Brief*, gives the following unique account of this method of correcting the faulty position of a fetus:

Ten years ago I was called hastily to the bedside of a woman who had been in hard labor over ten hours. A mal-presentation of the child was discovered by the attending physician, who was a young and rather inexperienced man. On arrival at her bedside I discovered the left shoulder, neck and part of the side had been forced down and out of the vulva by the severe pains. In this extremity I had to do something immediately to remedy the disastrous state of affairs. The simplest thing I could think of or suggest was to put the woman on a door, lower her head and raise

her feet almost to standing her on her head. With assistance of the doctor and two women I held her in this position nearly half an hour; gave her several doses of lobelia and gelsemium to relax all the muscles; with my hands manipulated the abdomen and the mal-presenting parts. After a while I found the whole presenting parts had re-entered the uterus, which latter, by force of gravity, had passed up into the abdomen. I then by degrees laid her horizontally, finally returned her to bed, and in an hour more the head presented under returning pains. The child was delivered safe and sound. Here is a pointer not to be slightly passed by.

* * *

GNORRHEAL ARTHRITIS.—In the *Bulletin of the Maryland University Hospital*, Dr. John S. Fulton gives a clinical lecture on this subject in which he says that gonorrhoeal arthritis is in no sense a rheumatism and the expression is a bad one. The inflamed joint is related more to the gonorrhoea than to the rheumatism and the misnomer is misleading. True rheumatism attacks several joints at once or successively and the joints will get well about in the order in which they were attacked, while gonorrhoeal rheumatism usually begins in one joint and though others may be attacked the first joint usually continues painful. The knee or ankle is affected by preference. In gonorrhoeal rheumatism the urine and the skin are not affected, while they are in ordinary rheumatism; heart complications are rather common after inflammatory rheumatism, while after gonorrhoea the heart is not often attacked, although we now find that it is more often affected after gonorrhoea than was formerly believed. Gonorrhoeal rheumatism is more protracted and more obstinate but less painful than ordinary rheumatism. Women may have gonorrhoea with little discomfort and in the same way a gonorrhoeal rheumatism in women may be overlooked. The gonococcus is found in the serous effusion in the joint. Ankylosis may follow a bad case of gonorrhoeal rheumatism. The

prognosis is usually good. Treatment amounts to little. The salicylates are of no use. Morphia should be used if the pain is bad.

* * *

FORMALDEHYDE.—Von Hoffmann discovered formaldehyde in 1868 by passing the vapor of wood alcohol mixed with air over finely divided platinum or copper. It has recently been put to practical use.

The subject has been carefully studied of late by Passed Assistant Surgeon, U. S. M. H. S., J. J. Kinyoun, and his work is published in the *Public Health Reports*. First experiments were tried on cultures. Ordinarily formaldehyde solutions exposed to the air will penetrate all parts of a small space, but in a large room a certain quantity of gas and vapor was lost and the liquid becoming condensed by evaporation, a yellowish-white amorphous powder is the result.

By using a bell-jar and a vacuum apparatus more of the gas could be obtained. When the gas thus formed was liberated it was very penetrating and effective. Without going into detail it may be said that Dr. Kinyoun devised an apparatus by which rooms, shipholds and almost every kind of article could be disinfected thoroughly in a short time and with no risk or danger. The production of formaldehyde is so inexpensive and it is such a valuable germicide that it will probably be generally used in the future instead of sulphur fumes.

* * *

PARALYSIS OF THE ULNAR NERVE FROM CYCLING.—Destot (*British Medical Journal*), after a long bicycle ride, suffered from paresthesia of the ring and little finger and loss of sensation to puncture and to touch, as well as paresis of the interossei, lumbricales and adductor muscles. These effects were due to pressure of the nerve branches between the handle of the bicycle and the pisiform bone. The author believes that the obliquity of the handle bar was the chief cause; for this reason he suggests a strictly transverse bar, as the pressure then is thrown on the deeper and better protected parts of the hand.

MARYLAND
Medical Journal.

PUBLISHED WEEKLY.

TERMS OF SUBSCRIPTION, \$3.00 a year, payable in advance, including postage for the United States, Canada and Mexico. Subscriptions may begin with any date.

DATE OF PAYMENT.—The date following the subscriber's name on the label shows the time to which payment has been made. Subscribers are earnestly requested to avoid arrearages.

CHANGES OF ADDRESS.—When a change of address is ordered, both the old and new address must be given. Notice should be sent a week in advance of the change desired.

TO CORRESPONDENTS.—Original articles are solicited from members of the profession throughout the world. Reprints will be furnished in payment of accepted articles if the author's wish is so stated at the time.

CORRESPONDENCE upon subjects of general or special interest, prompt intelligence of local matters of interest to the profession, items of news, etc., are respectfully solicited. Marked copies of other publications sent us should bear the notice "marked copy" on wrapper.

MARYLAND MEDICAL JOURNAL,
 209 Park Ave., Baltimore, Md.

WASHINGTON OFFICE:
 913 F Street, N. W.

BALTIMORE, MARCH 6, 1897.

WHILE the normal body temperature is said to be about $98\frac{2}{5}$ ° F. it does not remain at that point during the *The Hour of Death*. whole twenty-four hours, but there is a normal curve of health showing that sometimes during the day the temperature may be below and in some it is above that point. The balance between heat production and heat loss in a healthy individual is so well maintained that within these narrow limits the temperature varies very little whether the individual be in a cold or a warm room, indoors or out. There seems to be also times in the day when the body possesses a lowered vital resistance beyond that of other times.

In this connection, a writer in the *British Medical Journal* has tried to collect some statistics on the hour of death and while they may have little practical value, still they are of interest. Taking 1000 deaths in an institution and drawing deductions from these, this investigator found that the greatest rise in the death rate was between five and seven in the morning for men, while for women the most fatal hour was between six and seven

in the evening, but among the women there was not that preference for any fixed time so well marked as among men.

The experience of many persons in private practice and in hospital would tend to show that the hour of death occurred most usually an hour or two after midnight and about six in the evening. There, therefore, must be some reason aside from the disease itself to bring about these facts and most certainly it would show that the time of least vital resistance corresponds most nearly to the hours when death is said most frequently to occur.

From this, little may be learned except that the invalid should be watched especially at these periods of the day and by rest and nourishment be tided over such depressing periods.

* * *

A PHYSICIAN'S work is naturally unselfish and a conscientious man is often too ready to forget himself for others. Dr. John W. Teale gives a few hints in the *British*

Medical Journal to medical men on the preservation of their health. He thinks there are many things which are certainly conducive to a physician's success and one of these is a power of concentration with a command of temper.

Even very ill persons notice when the physician does not treat all their complaints or hear their questions and they naturally do not like lack of attention. Again, when the physician is tired out and unstrung he is naturally often irritated by the patient's querulous complaints.

Now to be able to come up to the standard in these two requisites, a simple, healthy life with exercise is necessary. To keep in health it is not necessary to devote a large part of each day to physical exercise, but ten minutes a day on rising or retiring with light dumb bells will accomplish wonders. Regular meals, if possible, and if not, then a light soup is refreshing at odd times. Stimulants, except on rare occasions, are unnecessary. They too often lay the foundation for a tippling physician, who soon loses his practice and the respect of the community. A cold bath in a warm room is a great invigorator. The underclothing should not be too heavy. It is also recommended that the teeth be

looked after, for an aching tooth is sure to ache harder when the person is most wearied.

Physicians, as a rule, do not take care of themselves. They say, "Do as I say and not as I do." Eating late at night is absolutely necessary if there is great fatigue. It is hard to lay down a fixed rule for everyone, for "what is one man's meat may be another man's poison," but as a rule, physicians can and should look after their own health for the sake of their dependent families, if not for themselves.

* * *

EVERY physician of experience knows the difficulty of determining the nature of an eruptive fever before the eruption is well out upon the skin. Yet it is but reasonable to expect that with the advance of medicine clinical investigation will render it possible for the expert to identify these diseases at a period at least as early as the beginning of infectiousness. For this end it is evident that extreme precision of study will be necessary.

That these fevers have rashes in the mouth and throats is well known, and many are aware that these mouth and throat rashes often precede the eruption upon the skin by half a day or more, thus aiding in the diagnosis of certain difficult cases. Heretofore, however, the existence of this rash on the mucous membrane has been used chiefly in the distinction of local or general skin eruptions from those of eruptive fevers.

In the *Archives of Pediatrics*, December, 1896, Dr. Koplik of New York attempted to show that there is in measles a mouth eruption, preceding by a day or more the skin eruption; that it is found in measles alone and has very definite characteristics. It is not located in or about the fauces, which are more or less congested and red-spotted in many sorts of fever. It is located only on the mucous membrane of the lips and cheeks. It consists of small, bright-red spots, in the center of each of which strong daylight reveals a minute bluish-white speck. There may be as few as six of them or they may cover the whole inner surface of lips and cheeks.

This eruption appears in the first twenty-four or forty-eight hours of the stage of invasion and lasts several days. By the time the skin rash is well-marked these isolated

spots of red have been submerged in the general tide of redness which has spread from the fauces over the whole mouth, while the bluish-white dots still persist.

Dr. Koplik has not found the spots in rubella (German measles), scarlatina or influenza. Aphthae are less red, lack the bluish-white speck and get yellow in the center. Muguet spots are white, not bluish-white. Dr. Koplik has (if his observations can be endorsed by further study) not only given a most valuable diagnostic contribution but taught a lesson in minute observation.

* * *

BECAUSE the house surgeon in a hospital in Williamsburgh, New York, charged the widow of a patient a fee of twenty-five dollars for filling out a certificate by which she was enabled to recover insurance on her late husband's life, the executive committee of the hospital was aroused to investigate. This is a question which belongs as a side issue to the dispensary and hospital abuse question.

Those who take no interest in, or know nothing of, this question, or who are independent of hospitals, always uphold any charity for the help of the poor without considering whether it is actual help or whether it is pauperizing the poor patients and perhaps taking practice from poor physicians. It has always been a custom in most hospitals and even in the almshouses to make a charge to a patient's family for signing any papers by which the beneficiaries of that patient obtain money, and why a board of hospital trustees should take time to consider that question is not easy to see.

There seems to be a desire on the part of some to pay all persons connected with any institution except the medical staff, which is supposed to do its work for nothing and be glad to have the opportunity to contribute that much to charity. The sooner this idea is dispelled the better for the profession and perhaps for the people.

When a man makes a charge for a service rendered and there is money to pay and the demand is followed up by payment, he usually obtains more respect than the one who gives his services away and thus belittles his work. Let physicians be charitable where such charity is deserving, but let them not fail to stand up for their own rights.

Medical Items.

We are indebted to the Health Department of Baltimore for the following statement of cases and deaths reported for the week ending February 27, 1897.

Diseases.	Cases Reported	Deaths.
Smallpox.....		
Pneumonia.....		24
Phthisis Pulmonalis.....		14
Measles.....		
Whooping Cough.....	4	3
Pseudo-membranous Croup and Diphtheria. }	17	1
Mumps.....	4	
Scarlet fever.....	18	
Varioloid.....		
Varicella.....	1	
Typhoid fever.....	1	1

Georgetown University will soon have a model hospital.

Dr. Robert H. Power died at Newport News last week, aged 73 years.

College Day at the Woman's Medical College was a grand success.

The Maryland Public Health Association will hold two meetings a year.

Washington is taking steps to prevent a pollution of her water supply.

The police of Baltimore are enforcing the sweat shop law and arresting the violators.

The District of Columbia will have over \$100,000 appropriated for a site for a contagious hospital.

Dr. Henry Hartshorne, a graduate of the University of Pennsylvania in 1848 and formerly of Philadelphia, died recently at the age of 73.

The County Medical Association of New York had a special meeting last week to consider the important subject of hospital and dispensary abuse.

A society is being organized in New York for the purpose of testing the efficacy of music as an aid in the treatment of certain diseases.

Dr. H. B. Bibble, Sr., a well-known physician of Blacksburg, Virginia, died last week at the age of ninety-two. He practiced until a few years ago.

The Medical Association of the District of Columbia is waging war on dispensary and hospital abuse.

The successor of DuBois-Reymond in the chair of physiology at the Berlin University will probably be either Professor Munk of Berlin, or Professor Kühne of Heidelberg.

The Berlin Medical Society, on January 6, unanimously re-elected Professor Virchow as President. Professor Virchow opened the meeting with a speech in memory of Dr. Du Bois-Reymond.

Dr. Alexander C. Abbott, professor of hygiene in the University of Pennsylvania, has been appointed chief of the bacteriological division of the Philadelphia bureau of health in succession to Dr. B. Meade Bolton, resigned.

Dr. C. L. Mattfeldt, sanitary officer for Catonsville and vicinity, has written to the Commissioners offering to inspect all the schoolhouses in the First district and also to see that the children attending the schools are successfully vaccinated.

According to the *Medical News*, Dr. Osler of the Johns Hopkins University read a paper before the New York County Medical Society on Monday evening, February 22, on the "Diagnosis of Malarial Fever." During his remarks in the discussion that followed, he made the somewhat startling assertion that death from malaria in the region north of Mason and Dixon's line is almost unknown.

The Baltimore Medical Association has elected the following officers for the coming year: President, Dr. James E. Gibbons; First Vice-President, Dr. W. A. B. Sellman; Second Vice-President, Dr. J. T. King; Recording Secretary, Dr. Eugene Lee Crutchfield; Corresponding Secretary, Dr. C. Urban Smith; Executive Committee, Dr. Joseph T. Smith, Dr. W. E. Wiegand and Dr. J. L. Ingle.

Passed Assistant Surgeon H. D. Geddings, United States Marine Hospital Service, was appointed by the President on February 8, 1897, technical delegate on the part of the United States to participate in the sanitary conference at Venice, Italy, and to aid and advise the representative of the United States in attendance thereon. Dr. Geddings sailed for Liverpool, en route to Venice, on February 13, 1897.

Book Reviews.

MINOR SURGERY AND BANDAGING. By Henry R. Wharton, M. D., Demonstrator of Surgery in the University of Pennsylvania. New (3d) edition. In one 12mo. volume of 594 pages, with 475 engravings, many being photographic. Cloth, \$3.00. Philadelphia: Lea Brothers & Co. 1896.

This practical little work, which has reached its third edition in a few years, is written in a way to commend itself to the profession. Not only have many additions with a careful revision been made, but the operation parts have been much enlarged. All the descriptions and directions are brief but clear. One of the greatest helps is the illustrations, which are 475 in number in a book of not 600 pages, with every operation and procedure clearly illustrated. The book is to be recommended.

The Bulletin of the Pasteur Institute is the new name for the *Therapeutic Review*, edited by Dr. Paul Gibier and published by the Pasteur Institute. This number contains several articles, specially one on a "Proposed Hospital for Physicians Affected with Tuberculosis of the Lungs." In the report on the patients treated at the Institute in 1896, Dr. Gibier, in speaking of the fatal cases from Baltimore, says that "not one of the above recorded deaths can be accounted as a failure of the Pasteur treatment, inasmuch as the symptoms of the disease made their appearance less than fifteen days after the patients had left the institute."

MESSRS. J. B. LIPPINCOTT COMPANY announces a second edition of a Clinical Gynecology in one volume by the late Dr. John M. Keating and Dr. Henry C. Coxe. Price \$6, \$7 and \$8, according to binding, with about 1000 pages. Among the chapters is one on Genital Tuberculosis, by Dr. John Whitridge Williams of Baltimore, and one on Methods and Preparations for Operations; General Operative Technique, by Dr. Hunter Robb of Cleveland.

REPRINTS, ETC., RECEIVED.

An Improved Surgical Bed. By August Schachner, M. D., Louisville. Reprint from *Annals of Surgery*.

Gonorrhoea; Its Ravages and Its Prophylaxis. By Albert A. Burr, Ph.B., M. D., Chicago. Reprint from the *Chicago Medical Recorder*.

Current Editorial Comment.**ENDORSEMENTS**

Kansas City Medical Record.

ENDORSEMENTS of the medical profession regarding the efficacy of drugs, mineral waters and kindred remedies have become disgustingly epidemic, the less the value the greater the need of support, and it is obtained without regard to the actual value as a therapeutic agent. Physicians should be exceedingly cautious in these matters and favor no remedy that by long trial has not given good satisfaction in practice.

TEACHING AND EXAMINING.

The Lancet.

WE have again and again raised a protest against the present system of teaching and examining as being responsible for the marked decline in the amount of time given by the medical student in late years to the practical work of the professional curriculum. The period of study has been lengthened, but we see no evidence of an increased attention to those practical subjects which form the bedrock on which his subsequent daily work must be founded. Scientific subjects are allowed to increase daily and to encroach more and more on the time which should be spent in the dissecting-room, the laboratories, and the wards and out-patient rooms of the hospital.

CAUSES OF DEATH.

Medical Examiner.

THE facility and accuracy with which physicians who are called in cases of sudden death diagnose the cause of death is a source of wonderment to the suffering public. The worst of it is that everything goes when the doctor hath said it. There are three causes of death which are seldom questioned; heart disease, apoplexy, and when the doctor wishes to be particularly learned, heart failure. It is seldom that a person dies who does not have heart failure. The question is, could the heart do anything else than fail if the party died? The fact is that without an autopsy, and in some cases a chemical analysis, it is next to impossible to state with accuracy the cause of sudden death. Often the snap judgment on the part of the physician is a bit of professional presumption. A decision of this kind should never be made without a deliberate investigation or consideration, and after a post-mortem if necessary.

Publishers' Department.

Society Meetings.

BALTIMORE.

- BALTIMORE MEDICAL ASSOCIATION, 847 N. Eutaw St. Meets 2d and 4th Mondays of each month.
- BOOK AND JOURNAL CLUB OF THE FACULTY. Meets 2d and 4th Wednesdays, 8 P. M.
- CLINICAL SOCIETY, 847 N. Eutaw St. Meets 1st and 3d Fridays—October to June—8.30 P. M. S. K. MERRICK, M. D., President. H. O. REIK, M. D., Secretary.
- GYNECOLOGICAL AND OBSTETRICAL SOCIETY OF BALTIMORE, 847 N. Eutaw St. Meets 2d Tuesday of each month—October to May (inclusive)—8.30 P. M. WILMER BRINTON, M. D., President. W. W. RUSSELL, M. D., Secretary.
- MEDICAL AND SURGICAL SOCIETY OF BALTIMORE, 847 N. Eutaw St. Meets 2d and 4th Thursdays of each month—October to June—8.30 P. M. W. S. GARDNER, M. D., President. CHAS. F. BLAKE, M. D., Corresponding Secretary.
- MEDICAL JOURNAL CLUB. Every other Saturday, 8 P. M. 847 N. Eutaw St.
- THE JOHNS HOPKINS HOSPITAL HISTORICAL CLUB. Meets 2d Mondays of each month at 8 P. M.
- THE JOHNS HOPKINS HOSPITAL MEDICAL SOCIETY. Meets 1st and 3d Mondays, 8 P. M.
- THE JOHNS HOPKINS HOSPITAL JOURNAL CLUB. Meets 4th Monday, at 8.15 P. M.
- MEDICAL SOCIETY OF WOMAN'S MEDICAL COLLEGE. SUE RADCLIFF, M. D., President. LOUISE ERICH, M. D., Corresponding Secretary. Meets 1st Tuesday in the Month.
- UNIVERSITY OF MARYLAND MEDICAL SOCIETY. Meets 3d Tuesday in each month, 8.30 P. M. HIRAM WOODS, JR., M. D., President, dent. E. E. GIBBONS, M. D., Secretary.

WASHINGTON.

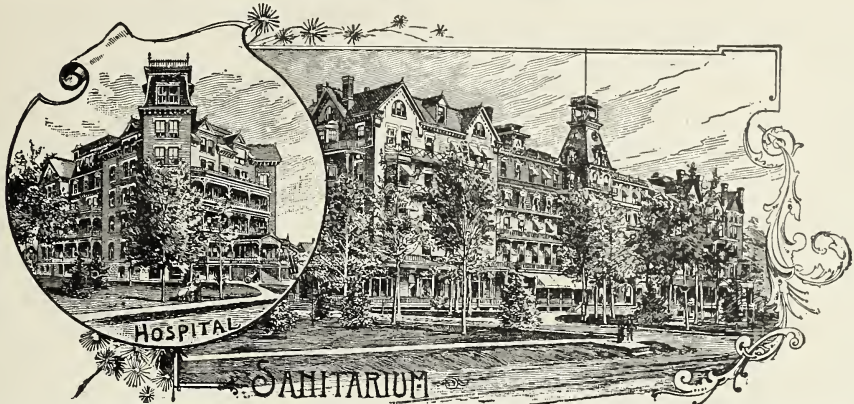
- CLINICO-PATHOLOGICAL SOCIETY. Meets at members' houses, 1st and 3d Tuesdays in each month. HENRY B. DEALE, M. D., President. R. M. ELLYSON, M. D., Corresponding Secretary. R. H. HOLDEN, M. D., Recording Secretary.
- MEDICAL AND SURGICAL SOCIETY OF THE DISTRICT OF COLUMBIA. Meets 2d Monday each month at members' offices. FRANCIS B. BISHOP, M. D., President. LEWELLYN ELIOT, M. D., Secretary and Treasurer.
- MEDICAL ASSOCIATION OF THE DISTRICT OF COLUMBIA. Meets Georgetown University Law Building 1st Tuesday in April and October. W. P. CARR, M. D., President. J. R. WELLINGTON, M. D., Secretary.
- MEDICAL SOCIETY OF THE DISTRICT OF COLUMBIA. Meets Wednesday, 8 P. M. Georgetown University Law Building. S. C. BUSEY, M. D., President. S. S. ADAMS, M. D., Recording Secretary.
- WOMAN'S CLINIC. Meets at 1833 14th Street, N. W., bi-monthly. 1st Saturday Evenings. MRS. M. H. ANDERSON, 1st Vice-President. MRS. MARY F. CASE, Secretary.
- WASHINGTON MEDICAL AND SURGICAL SOCIETY. Meets 1st Monday in each month. N. P. BARNES, M. D., President. W. F. BRADEN, M. D., Secretary.
- WASHINGTON OBSTETRICAL AND GYNECOLOGICAL SOCIETY. Meets 1st and 3d Fridays of each month at members' offices. GEORGE BYRD HARRISON, M. D., President. W. S. BOWEN, M. D., Corresponding Secretary.

PROGRESS IN MEDICAL SCIENCE.

It is announced that about March 10, Warner's Pocket Medical Dictionary will be ready for distribution. It will contain 300 pages, size $6\frac{1}{2} \times 4$. The cost to physicians will probably be seventy-five cents a copy. The work will comprise about 10,000 definitions, and will be especially adapted to the use of students and busy practitioners. The publishers are the well-known pharmaceutical chemists, William R. Warner & Co., of Philadelphia.

JNO. C. LEVIS, M. D., West Bridgewater, Pa., says: I have used Celerina in my own case for insomnia. Among all the hypnotic preparations and nerve tonics, it stands justly preëminent. Several persons are now using it and report that no preparation has given such permanent and prompt relief. In a general practice of more than half a century, this is perhaps the first public testimony I have offered. Celerina is the very best nerve tonic now offered to the profession and can not be too highly recommended. To those wanting a nerve stimulant it will be just the remedy.

PRIZE OFFERS TO PHYSICIANS.—Messrs. A. G. Spalding & Bros. are advertising extensively in the medical publications the Christy Anatomical Saddle. The Christy is the pioneer in the anatomical saddle line, and Messrs. Spalding firmly believe they have without question the best bicycle saddle on the market. In order to get from the medical profession their ideas on the Christy Saddle, they make the following offer: They would like to receive from physicians an advertisement setting forth the good points of the Christy Saddle, showing the pelvis bones on the two saddles as used in all Spalding advertisements, and not to occupy a space of more than a half a page, magazine size; the competition to close April 15. First prize, \$50 in cash; second prize, \$25 in cash; third prize, \$10 in cash. For every individual advertisement accepted and used one Christy Saddle will be sent to the physician submitting the same. All communications and copies of advertisements submitted must be sent to the American Sports Advertising Agency at 241 Broadway, New York City, and at the sender's risk. Under no circumstances will advertisements be returned.



The Battle Creek SANITARIUM

Is a place where chronic invalids, especially those suffering from the various forms of indigestion, the diseases peculiar to women, constipation, chronic malarial poisoning, anæmia, obesity, the uric acid diathesis, neurasthenia, migraine and similar ailments are trained into health by the aid of systematic regimen, scientific hydro-

therapy, massage, Swedish movements, Swedish gymnastics, and other rational means. Most cases of Bright's disease, diabetes, locomotor ataxia, and many other maladies which are incurable under ordinary conditions, are greatly improved by the combined use of rational remedies and systematic regimen, and many are practically cured. Extensive bacteriological, chemical and microscopical laboratories connected with the institution afford excellent facilities for accuracy in diagnosis and original research.

The Institution is Conducted Strictly within Ethical Lines.

For information concerning the facilities afforded, terms, etc., address

THE SANITARIUM, Battle Creek, Mich.

Post Partum Disinfection.

tion of a proprietary or doubtful nature, through their journal, papers or society discussions, so when a preparation comes recommended through such a source it can be relied upon as having stood both clinical and scientific tests and may be employed with reasonable assurance that good results will always follow its use when judiciously used. Tyree's Antiseptic Powder is perhaps more extensively used by gentlemen high in authority for the various forms of leucorrhœa than any preparation ever introduced.

The dignity of the American Medical Association, the conservative methods of its members are such that no recognition is ever given a preparation of a proprietary or doubtful nature,

Accouchement Force in Certain Obstetrical Complications.

Read before the Section of Obstetrics and Gynecology, at the Forty-fourth Annual Meeting of the American Medical Association. Llewellyn Eliot, A. M., M. D., Surgeon to Providence Hospital and Eastern Dispensary and President of the Medical Association of the District of Columbia, etc., Washington, D. C.

"In irrigating these cases, we may use the solution of bichloride of mercury, carbolic acid or any other medication which individual preference may suggest; for my part I employ a solution of Tyree's antiseptic powder, which consists of borax, alum, carbolic acid, glycerin, and the active principles of thyme, mentha, gaultheria, and eucalyptus scientifically combined.

Teaspoonful to one pint of water, injected three or four times a day, always gives immediate relief.

J. S. TYREE, Chemist, Washington, D. C.



A PURE LAXATIVE, made from fresh selected Drugs suitable for all ages and conditions in removing Constipation. FORMULA: Each fluid ounce (with aromatics) contains: Rhamni Purshiani Cortex (Casara Sagrada), gr. xxx; Podophyllum Peltatum (May Apple), gr. xxx; Taraxacum Officinale (Dandelion), gr. xxx; Juglans Chinera (Butternut), gr. xxx; Cassia Acutifolia (Alexandria Senna), 1 drachm; Potassii et Sodii Tartras (Rochelle Salt), 1 drachm. There are few disorders that cause so much mischief as CONSTIPATION. The ELIXIR SIX APERIENS is recommended as a pleasant, efficient, and trustworthy remedy for obstinate constipation of the bowels and the diseases which attend it, as Headache, Flatulence, Piles, Liver, Stomach, Intestinal and Uterine Troubles, and the many OTHER AILMENTS which the physician can trace to FÆCAL RETENTION. Among the many advantages this Elixir has, it does not tend to leave the bowels in a confined state, but strengthens the muscular fibers of the Intestines, thereby producing permanent benefit upon the peristaltic action of the bowels. The tendency to griping and nausea produced by the ordinary Cathartic is overcome by this elegant Pharmaceutical Preparation, which MOVES THE BOWELS GENTLY WITHOUT PAIN OR OTHER INCONVENIENCE. We attribute its mild and efficient action on the bowels to the combination of the six well-selected Laxatives. It is the combination which is so remedial, proving that the united action of remedies is often requisite to success when either alone is insufficient. Physicians when prescribing will please write: R. APERIENS ELIX. SEX.—One bottle. (WALKER-GREEN'S). The Druggist will please write directions on his own label. Attention is also called to our ELIXIR SIX BROMIDES, ELIXIR SIX HYPOPHOSPHITES, and ELIXIR SIX IODIDES, which are unexcelled for clinical efficiency and palatability. Wholesale price per dozen: Iodides, \$8.00; Bromides, \$8.00; Hypophosphites, \$8.00; Aperiens, \$8.00. SEND FOR DESCRIPTIVE CIRCULAR. These Elixirs are kept in stock by Wholesale Druggists generally throughout the United States.

The Walker-Green Pharmaceutical Co.

(INCORPORATED.)

No. 180 W. Regent St., Glasgow, Scotland, & Kansas City, U.S.

A liberal discount will be allowed Physicians who desire to prove their clinical efficiency.

PROGRESS IN MEDICAL SCIENCE.

WE print below a reduced fac-simile of "Section 9" contained in the contract existing between Messrs. A. Gude & Co., chemists, Leipzig, Germany, and the M. J. Breitenbach Co., of New York, showing that in the introduction of Gude's Pepto-Mangan reliance is placed solely on the practitioner to accept it as the standard in the class of remedial agents to which it belongs.

* * *

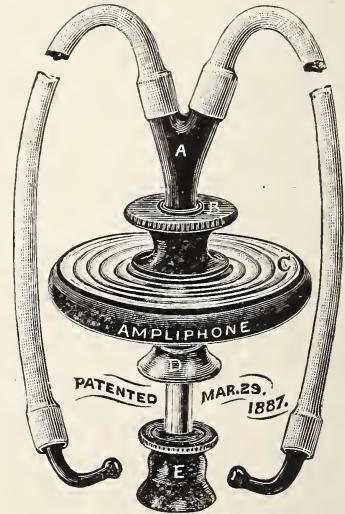
Section 9.

And it is further agreed between Dr. El. Sude a Co party of the first part and the M. J. Breitenbach Co party of the second part, that if at any time the said M. J. Breitenbach Co should by device or by advertising attempt to increase their business in Sude's Pepto Mangan other than through the recognized channels to the Medical Profession then in such event this Contract is to become null and void and all rights of the M. J. Breitenbach Co existing under this instrument immediately become the property of said Dr. El. Sude a Co without recourse to law

THE vitalizing and health-giving properties of Atlantic City sea air long ago attracted the attention of the medical profession far and wide and the wonderful growth and development of that city have demonstrated the reasonableness of the claims made for it as offering the most favorable conditions for the restoration of health, especially in certain forms of respiratory troubles. Physicians in recommending the advantages of a sea-side resort desire, in order to obtain the best results, to place those in their care under the most favorable conditions for recovery. To meet this requirement the management of the Hotel Dennis has brought into requisition the best architectural and sanitary skill in the equipment of this elegant hotel for the accommodation of their patrons. The improvements constitute practically an entire new building. The dining room, 56 x 92 feet, is one of the brightest and coolest in the city. Directly opposite the main entrance is the sun gallery, which is 16 feet wide by 84 feet long and connects the two wings. The elevator runs to all the floors. The sun gallery is one of the main features of the hotel. It is heated by steam, so as to keep a pleasant, moist temperature when the sun is not shining. The first room in the cross wing is the children's play-room, and adjoining this is the nurses' dining-room. Both of these rooms have a full view of the ocean. At the east

end of this wing is another feature of the New Dennis—the concert or amusement hall, a large room. Immense windows are on three sides, which admit the sea-breezes during the summer evenings and keep it delightfully cool and pleasant. In the east wing are the billiard-room and gentlemen's writing-room, and at the ocean end is the smoking-room, which, like the main parlor, extends the whole width of the wing and directly faces the ocean. Broad porches, the roofs of which are supported by massive columns, extend around three fronts of the hotel, so one can enjoy the cool shade at all hours of the day in summer and the bright sunshine at all hours of the day in winter. Other new features just added are the Oriental room and ladies' writing-rooms, facing the beach. On each floor are private bath-rooms, connected with the sleeping-rooms, which are large and well-ventilated. There are also hot and cold sea-water baths. In many of the rooms are open-grate fires, but all the rooms and halls, and, in fact, the whole house, are warmed by the most thorough system of steam-heating.

THE AMPLIPHONE.—We desire to call our readers' attention to the description in our advertising pages of this wonderful instrument for physical diagnosis which is now attract-



ing so much attention in the medical world. It is the new ally of the Roentgen rays in medical practice and the firm that handles it is a reliable one.



The First Step



in the treatment of Diphtheria should be the administration of

ANTITOXIN

It "should be administered as early as possible on a clinical diagnosis, not waiting for a bacteriological culture," says the

Report of the American Pediatric Society

The society also recommends "the most concentrated strength of an absolutely reliable preparation."

Mulford's Antitoxin

as stated in the report of the Bacteriologists of the Pennsylvania and Massachusetts State Boards of Health, meets all requirements.

H. K. MULFORD COMPANY PHILADELPHIA

Chicago: 112 and 114 Dearborn St.

Most Recent Brochure on Antitoxin Treatment Sent Free if You Mention this Journal.

"STANDARD"	No. 1—500 Units (5 cc.)	\$1.00
100 Units to each cc.	No. 2—1000 Units (10 cc.)	1.75
	No. 3—2000 Units (20 cc.)	3.25
"POTENT"	No. 1—500 Units (2 cc.)	\$1.25
250 Units to each cc.	No. 2—1000 Units (4 cc.)	2.25
	No. 3—2000 Units (8 cc.)	4.00
"EXTRA-POTENT"	No. 1—500 Units (1 cc.)	\$1.50
500 Units to each cc.	No. 2—1000 Units (2 cc.)	2.75
	No. 3—2000 Units (4 cc.)	5.00
	Metal Case	
Improved Antitoxin Syringe, No. 1, 10 cc.		\$3.00
	No. 2, 5 cc.	3.00

Proper Dosage, 1000 Units in Ordinary Cases

Bartholow

Says: "It has been supposed that any oil or fat may be used in place of cod-liver oil, and cream has been prescribed in this belief. These notions are erroneous."

For convenience in prescribing in unbroken packages we have 50c. and \$1.00 sizes.

SCOTT & BOWNE

Manufacturing Chemists
New York

Scott's Emulsion

THE STANDARD OF THE WORLD

contains the purest cod-liver oil, the whole oil, combined with hypophosphites and glycerine. The best authorities declare that "When cod-liver oil is indicated, all the oil must be used, not a fractional amount only of extracted matter."

In Prescribing—Specify "Scott's" Emulsion, otherwise your patients may get some of the "Ready-made" emulsions which druggists purchase in bulk or have bottled for them.

Who Knows About These Emulsions?—How much oil do they contain? Is it the best oil? Are there any other ingredients? Is the emulsion permanent? Who is responsible?



It never irritates

if used with a clean needle

Dose: 5 to 20 minims.

It never nauseates

when given by the mouth.

Dose: 5 to 30 minims.

50 Cents net per Bottle to Physicians.

SHARP & DOHME

BALTIMORE

CHICAGO

NEW YORK

Your Druggist has it or can get it for you.

WHEELER'S TISSUE PHOSPHATES.

Wheeler's Compound Elixir of Phosphates and Calisaya. A Nerve Food and Nutritive Tonic for the treatment of Consumption, Bronchitis, Scrofula and all forms of Nervous Debility. This elegant preparation combines in an agreeable Aromatic Cordial, in the form of a Glycerite acceptable to the most irritable conditions of the stomach: Bone Calcium Phosphate Ca_2PO_4 , Sodium Phosphate Na_2HPO_4 , Ferrous Phosphate Fe_3PO_4 , Trihydrogen Phosphate H_3PO_4 , and the active principles of Calisaya and Wild Cherry. The special indication of this combination of Phosphates in Spinal Affections, Caries, Necrosis, Ununited Fractures, Marasmus, Poorly Developed Children, Retarded Dentition, Alcohol, Opium and Tobacco Habit, Gestation and Lactation to promote Development, etc., and as a physiological restorative in Sexual Debility and all used-up conditions of the Nervous System should receive the careful attention of good therapeutists.

Notable Properties: As reliable in Dyspepsia as Quinine in Ague. Secures the largest percentage of Benefit in Consumption and all Wasting Diseases, "by determining the perfect digestion and assimilation of food." When using it, Cod Liver Oil may be taken without repugnance. It renders success possible in treating chronic diseases of Women and Children, who take it with pleasure for prolonged periods, a factor essential to maintain the good will of the patient. Being a Tissue Constructive, it is the best "general utility compound" for Tonic Restorative purposes we have, no mischievous effects resulting from exhibiting it in any possible morbid condition of the system. Phosphates being a natural food product, no substitute will do their work in the system.

DOSE—For an adult, one tablespoonful three times a day, after eating; from seven to twelve years of age, one dessertspoonful; from two to seven, one teaspoonful; for infants, from five to twenty drops, according to age.

Prepared at the Chemical Laboratory of T. B. WHEELER, M. D., Montreal, P. Q.
To prevent substitution, put up in pound bottles only and sold by all Druggists, at One Dollar.
Read the pamphlet on this subject sent you.



CAPSULES

	10 MINIMS CAPACITY.	PER DOZ.
List No. 53A	12 in Box,	\$2.25
" 53	24 " "	4.25
" 54	36 " "	6.25

"PERLOIDS," or Pearl-Shaped Capsules.
5 Minims Capacity.

	PER DOZ.
Cheaper and better than the imported Perles.	
List No. 421A	40 in vial, \$4.75
" 421B	80 " " 9.00

A Trial Bottle or Dozen sent prepaid on receipt of list price.

H. PLANTEN & SON,

Manufacturers of Filled and Empty Gelatine Capsules,
ESTABLISHED 1836.) NEW YORK.

THE RICHARD GUNDRY HOME CATONSVILLE, MD.

able. The Home is conducted by Mrs. Dr. Richard Gundry and Dr. R. F. Gundry. For further information, address DR. R. F. GUNDRY, Box 107 Catonsville, Md., or 1E. Centre St., Baltimore, Md.
*Consulting Physicians: Dr. Henry M. Hurd, Supt. Johns Hopkins Hospital; Professors Thomas Opie and Geo. J. Preston, Baltimore, Md.; Dr. C. G. W. Macgill, Catonsville; Professor G. H. Rohé, Maryland Hospital, Catonsville, Md. References: Dr. Wm. Osler, Physician in chief Johns Hopkins Hospital; Dr. John B. Chapin, Pennsylvania Hospital for Insane, Philadelphia, Pa.; Dr. W. W. Godding, Government Hospital, Washington. D. C.; Francis White, Esq., and Gilmore Meredith, Esq., Baltimore, Md.

Western Pennsylvania Medical College. PITTSBURGH, PA.

MEDICAL DEPARTMENT OF THE WESTERN UNIVERSITY OF PENNSYLVANIA.

Sessions 1896-1897.

The REGULAR SESSION begins on third Tuesday of September, 1896, and continues six months. During this session, in addition to four Didactic Lectures, two or three hours are daily allotted to Clinical Instruction. Attendance upon four regular courses of Lectures is requisite for graduation. A four years' graded course is provided. The SPRING SESSION embraces recitations, clinical lectures and exercises, and didactic lectures on special subjects; this session begins the second Tuesday in April, 1897, and continues ten weeks.

The laboratories are open during the collegiate year for instruction in chemistry, microscopy, practical demonstrations in medical and surgical pathology, and lessons in normal histology. Special importance attaches to "the superior clinical advantages possessed by this College." For particulars, see annual announcement and catalogue, for which address the Secretary of the Faculty, PROF. T. M. T. McKENNA, 810 Penn Ave., Pittsburgh, Pa. Business correspondence should be addressed to PROF. W. J. ASDALE, 5523 Ellsworth Ave., Pittsburgh, Pa.

CHIONIA

THE HEPATIC STIMULANT

INDICATED IN

Diseases Caused by Hepatic Torpor.

Does not purge, per se, but under its use the Liver and Bowels gradually resume their normal functions.

DOSE—ONE TO TWO FLUID DRACHMS, THREE TIMES A DAY.

PEACOCK'S BROMIDES

THE STANDARD SEDATIVE

INDICATED IN

Congestive, Convulsive and Reflex Neuroses.

Absolutely uniform in purity and therapeutic power, produces clinical results which can not be obtained from the use of commercial bromide substitutes.

DOSE—ONE TO TWO FLUID DRACHMS IN WATER, THREE TIMES PER DAY.

PEACOCK CHEMICAL COMPANY, St. Louis, Mo.

—AND—

36 BASINGHALL ST., LONDON, ENGLAND.

SENG

FOR

**INDIGESTION, MALNUTRITION, PHTHISIS,
AND ALL WASTING DISEASES.**

DOSE—One or more teaspoonfuls three times a day. For babies, ten to fifteen drops during each feeding.

CACTINA PILLETS

FOR **ABNORMAL HEART ACTION.**

DOSE—One Pilet every hour, or less often as indicated.

SULTAN DRUG CO., St. Louis and London.

ANTITOXINS—

Diphtheria, Streptococcus Tetanus and Venomous

We are prepared to furnish any or all of the above-named ANTITOXINS at a moment's notice. They are the products of the Pasteur Laboratories, Paris; whence we receive them by direct and frequent importation, thus insuring their freshness and purity. We also furnish ANTITUBERCLE SERUM, which has now been successfully used by more than 100 American physicians.

Our DIPHTHERIA ANTITOXIN (Roux) is made in two strengths, each vial of 10 c. c. containing 2,000 or 3,000 units, respectively.

Literature or written information cheerfully furnished on request. Please mention this journal.

PASTEUR VACCINE COMPANY, Ltd.

(United States and Canada)

56 Fifth Avenue, CHICAGO

Opium and its alkaloids are invaluable drugs, but have disadvantages. Papine serves a similar purpose, without the disadvantages. IODIA is an alterative in the true sense of the word. BROMIDIA has a host of users throughout the civilized world, many of whom stand high in professional renown. In prescribing these preparations always specify "*Battle's*," and see that the prescription goes to an honorable and reputable druggist who will not stultify or degrade his good name and reputation by *substitution*.

DEERING J. ROBERTS, M. D.,

In Southern Practitioner, Sept., 1896.

Yours for Health

The Salt River Valley
of Arizona
and the various
health resorts in
New Mexico

are unrivaled for the cure of chronic lung and throat diseases. Pure, dry air; an equable temperature; the right altitude; constant sunshine.

Descriptive pamphlets, issued by Passenger Department of Santa Fe Route, contain such complete information relative to these regions as invalids need.

The items of altitude, temperature, humidity, hot springs, sanatoriums, cost of living, medical attendance, social advantages, etc., are concisely treated.

Physicians are respectfully asked to place this literature in the hands of patients who seek a change of climate.

Address **G. T. NICHOLSON.**

CHICAGO.

G.P.A., A.T. & S.F.R.Y.

"AMERICA'S GREATEST RAILROAD."

NEW YORK CENTRAL & HUDSON RIVER R. R.

The Four-Track Trunk Line.

Trains leave Grand Central Station, Fourth Avenue and 42nd Street, New York, center of hotel, residence and theatre district, as follows:—

For Albany, Troy, Utica, Syracuse, Rochester, Buffalo, Niagara Falls and the West, week days: 8:30, 9:30, 10:30 A. M.; 1:00, 4:30, 6:00, 7:30, 9:15 P. M. 12:10 midnight; Sundays, 9:30 A. M., 1:00, 4:30, 6:00, 7:30, 9:15 P. M.

For Saranac Lake, Lake Placid and Montreal, via Adirondack Mountains; week days, 8:30 A. M., 6:00 P. M.; Sundays, 6:00 P. M.

For Montreal, via Saratoga, Lake George, Lake Champlain and via Burlington and Green Mountains; week days, 9:30 A. M., 6:25 P. M.; Sundays, 6:25 P. M.

For the Berkshire Hills—9:06 A. M., 3:35 P. M., daily, except Sunday.

MEDICAL CONVENTIONS

1897.

Physicians and others attending the various Medical Conventions for 1897 should bear in mind that the B. & O. offers special inducements to conventions of this kind. The scenic attractions of this Route are unsurpassed in this country. All B. & O. trains between the East and West run via Washington, and sufficient time limit is given on tickets to allow stop-over at the National Capital.

For Rates and further Information, Address

CHAS. O. SCULL, General Passenger Agent,

Or **L. S. ALLEN, A. G. P. A., Chicago, Ill.**

Baltimore, Md.

THE IMPROVED "YALE" SURGICAL CHAIR.

HIGHEST AWARD WORLD'S FAIR, OCT. 4TH, 1893.



Fig. V—Semi-Reclining.

- 1st. Raised by foot and lowered by automatic device.—Fig. I.
- 2nd. Raising and lowering without revolving the upper part of the chair.—Fig. VII.
- 3rd. Obtaining height of 39½ inches.—Fig. VII.
- 4th. As strong in the highest, as when in the lowest position.—Fig. VII.
- 5th. Raised, lowered, tilted or rotated without disturbing patient.
- 6th. Heavy steel springs to balance the chair.
- 7th. Arm Rests not dependent on the back for support.—Fig. VII—always ready for use; pushed back when using stirrups—Fig. XVII—may be placed at and away from side of chair, forming a side table for Sim's position.—Fig. XIII.
- 8th. Quickest and easiest operated and most substantial secured in positions.

- 9th. The leg and foot rests folded out of the operator's way at any time.—Figs. XI, XV and XVII.
- 10th. Head Rest universal in adjustment, with a range of from 14 inches above seat to 12 inches above back of chair, furnishing a perfect support in Dorsal or Sim's position.—Figs. XIII and XV.
- 11th. Affording unlimited modifications of positions.
- 12th. Stability and firmness while being raised and rotated.
- 13th. Only successful Dorsal position *without moving patient*.
- 14th. Broad turntable upon which to rotate the chair, which cannot be bent or twisted.
- 15th. Stands upon its own merits and not upon the reputation of others.

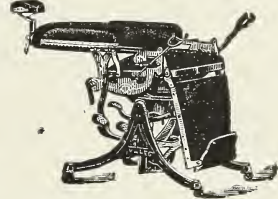


Fig. XVII—Dorsal Position.

Pronounced the *ne plus ultra* by the Surgeon, Gynæcologist, Oculist and Aurist.

MANUFACTURED EXCLUSIVELY BY

CANTON SURGICAL AND DENTAL CHAIR CO.,

38 to 54 East Eighth and 50 to 52 South Walnut Streets, CANTON, OHIO.

DO DOCTORS DISAGREE?

In some cases they do.

But the result derived by administering teaspoonful doses of Aletris Cordial three times daily, before and during gestation, has proven that the Medical Profession has arrived at only one verdict, and that is, they have to find the first case that has not been benefited by its use, as thousands of testimonials from reputable physicians will testify.

A FULL-SIZED BOTTLE SENT FREE TO ANY
PHYSICIAN WHO WILL PAY EXPRESS CHARGES.

RIO CHEMICAL CO., - - - ST. LOUIS, MO.

UNIVERSITY OF MARYLAND

SCHOOL OF MEDICINE

BERNARD CARTER, ESQ., PROVOST.

N. E. Cor. Lombard and Greene Streets, Baltimore, Md.

The Ninetieth Annual course of Lectures in this Institution will commence on October 1, 1896.

GEORGE W. MILTENBERGER, M. D., Emeritus Professor of Obstetrics and Honorary President of the Faculty.

SAMUEL C. CHEW, M. D., Professor of Principles and Practice of Medicine and Clinical Medicine.

WILLIAM T. HOWARD, M. D., Professor of Diseases of Women and Children, and Clinical Medicine.

JULIAN J. CHISOLM, M. D., Emeritus Professor of Eye and Ear Diseases.

FRANCIS T. MILES, M. D., Professor Physiology and Clinical Professor of Diseases of Nervous System.

L. McLANE TIFFANY, M. D., Professor of Surgery.

I. EDMONSDON ATKINSON, M. D., Professor of Therapeutics, Clinical Medicine and Dermatology.

DORSEY COALE, Ph. D., Professor of Chemistry and Toxicology.

RANDOLPH WINSLOW, M. D., Professor of Anatomy and Clinical Surgery.

L. E. NEALE, M. D., Professor of Obstetrics.

C. W. MITCHELL, M. D., Professor of Materia Medica and Clinical Medicine.

JOHN N. MACKENZIE, M. D., Clinical Professor of Diseases of the Throat and Nose.

J. HOLMES SMITH, M. D., Associate Professor of Anatomy and Demonstrator of Anatomy.

C. O. MILLER, M. D., Associate Professor of Histology and Pathology.

J. MASON HUNDLEY, M. D., Associate Professor of Diseases of Women and Children.

HIRAM WOODS, Jr., M. D., Clinical Professor of Eye and Ear Diseases.

JOSEPH T. SMITH, M. D., Lecturer on Hygiene, Medical Jurisprudence and Clinical Medicine.

FERD. J. S. GORGAS, M. D., D. D. S., Professor of Principles of Dental Surgery, and Dental Mechanism.

JAMES H. HARRIS, M. D., D. D. S., Professor of Operative and Clinical Dentistry.

For Circulars and any other further information apply to

R. DORSEY COALE, PH. D., Dean, 865 Park Avenue.

DENTAL DEPARTMENT.

The success which has attended the organization of the Dental Department of the University of Maryland, as evinced by the large class in attendance on the lectures and demonstrations of the last session, is unprecedented in the history of any other dental institution. It is also an evidence of a just appreciation of the advantages which the dental department of an old and honorable university offers to the student in the acquirement of knowledge, theoretical and practical, so essential to the successful practice of dentistry. Every facility is afforded for thorough instruction in all the branches pertaining to dental science.

For further information, apply to

F. J. S. GORGAS, M. D., D. D. S.,

Dean of the Dental Department of the University of Maryland,
845 N. Eutaw St., Baltimore, Md.

UNIVERSITY HOSPITAL,

S. W. COR. LOMBARD AND GREENE STS., BALTIMORE, MD.

This Institution, most pleasantly located, the capacity and comforts of which have undergone great development to meet the increasing demands of patients, is fitted up with all modern conveniences for the successful treatment of Medical and Surgical Diseases.

Its Medical staff comprises the FACULTY OF THE UNIVERSITY, and the entire management of the Institution, being under the direct supervision of that body, the sick may rely upon enjoying the benefits of an Infirmary as well as the comforts and privacy of a home, while seeking treatment for medical diseases and undergoing surgical operations.

Especial attention is called to the Lying-in Department of the Hospital, and the thorough privacy given to confinements.

When persons are compelled to leave their country residences to seek professional medical assistance in Baltimore no Institution offers greater facilities than the University Hospital, which presents, amongst other great advantages, that of having three resident Physicians, appointed by the Medical Faculty, all of whom are usually, one is always, in the building to carry out the instructions of the Professors.

BOARD IN THE WARDS \$5 PER WEEK, BOARD IN PRIVATE ROOMS \$10 TO \$15 PER WEEK.

MEDICAL STAFF OF THE HOSPITAL.

SURGEONS.

Prof. J. J. Chisolm, M. D., Prof. L. McLane Tiffany, M. D., Prof. Randolph Winslow, M. D.
Prof. J. Holmes Smith, M. D., Prof. Hiram Woods, Jr., M. D.

PHYSICIANS.

Prof. S. C. Chew, M. D., J. S. Fulton, M. D., Prof. W. T. Howard, M. D.,
Prof. I. E. Atkinson, M. D., Prof. F. T. Miles, M. D., Prof. C. W. Mitchell, M. D.

For further particulars, apply to the Medical Superintendent, ST. CLAIR SPRUILL, M. D.
or R. DORSEY COALE, PH. D., Dean.

Regular School of Medicine.
Co-educational.

HARVEY MEDICAL COLLEGE,

167-169-171 S. Clark St., Chicago.

Lectures 7 to 10 every week day evening. Clinics all day. Every year's graded course. Diplomas recognized by the Illinois State Board of Health. Tuition \$80; if paid in advance, \$65. For information, address

FRANCES DICKINSON, M. D.,
Secretary.

**University of Pennsylvania
DEPARTMENT OF MEDICINE.**

The 132nd ANNUAL SESSION will begin Friday October 1, 1897, at 12 M., and will end at Commencement, the second Thursday in June.

The Curriculum is graded, and attendance upon four Annual Sessions is required. College graduates in Arts or Science, who have pursued certain Biological studies, are admitted to advanced standing.

Practical Instruction, including laboratory work in Chemistry, Histology, Osteology, and Pathology, with Bedside Instruction in Medicine, Surgery, Gynecology, and Obstetrics, is a part of the regular course, and without additional expense.

For catalogue and announcement, containing particulars, apply to

DR. JOHN MARSHALL, DEAN,
36th St. and Woodland Avenue, Philadelphia.

Established 1780.
Walter Baker & Co., Ltd.

DORCHESTER, MASS.,

The Oldest and Largest Manufacturers

.. of ..



**PURE, HIGH GRADE
COCOAS
AND
CHOCOLATES**

on this Continent.

No Chemicals are used in their manufactures.

Baron von Liebig says Cocoa Preparations of good quality agree with dry temperaments and convalescents; with mothers who nurse their children; with those whose occupations oblige them to undergo severe mental strains; with public speakers, and with all those who give to work a portion of the time needed for sleep.

Buyers should ask for and be sure that they get the genuine

Walter Baker & Co.'s

goods, made at

DORCHESTER, MASS.

BELLEVUE HOSPITAL MEDICAL COLLEGE

CITY OF NEW YORK. SESSIONS 1897-98.

The REGULAR SESSION begins on Monday, September 27, 1897, and continues for twenty-six weeks Attendance on four regular courses of lectures is required for graduation. Students who have attended one full regular course of lectures at another accredited Medical College are admitted as second-year students without examination. Students are admitted to advanced standing for the second, third or fourth years, either on approved credentials from other accredited Medical Colleges or after examination on the subjects embraced in the curriculum of this College.

Graduates of other accredited Medical Colleges are admitted as fourth-year students, but must pass examinations in normal and pathological histology and pathological anatomy.

The SPRING SESSION consists of daily recitations, clinical lectures and practical exercises. This session begins March 28, 1898, and continues for twelve weeks.

The annual circular for 1897-8, giving full details of the curriculum for the four years, requirements for graduation and other information, will be published in June, 1897. Address AUSTIN FLINT, Secretary Bellevue Hospital Medical College, foot of East 26th Street, New York City.

HENRY B EGGERS, Professional
Masseur.

1626 Harford Ave., NEAR NORTH AVE

Graduate of the University of Leipzig, Germany; Lecturer on Massage at the University of Vienna, Austria, and Hamburg City Hospital, Germany.

Scientific Massage Treatment,
Swedish Movement.

15 Years' Hospital Experience. Lady Attendants.

References by Permission:—T. E. Shearer, M. D. John N. Mackenzie, M.D., M. B. Billingslea, M.D., Chas. G. Hill, M.D., Delano Ames, M.D., Theodore Cook, Sr., M.D., George J. Preston, M. D., W. T. Howard, M. D., James E. Dwinelle, M. D.

Patients Boarded
and Treated
at My Institute.

Registered at Directory for Nurses,
Medical and Chirurgical Faculty of Md.

TRADE MARK REGISTERED.

BARLEY CRYSTALS

New Diuretic, Relaxing Tonic Cereal; also
Gluten Dyspepsia Flour, and Diabetes Flour.
Pamphlet and Cooking Samples Free.
Unrivalled in America or Europe. Ask Dealers, or
Write Farwell & Rhines, Watertown, N. Y., U.S.A.

**PRINTING
FOR PHYSICIANS**

Office of MARYLAND MEDICAL JOURNAL

Practical
Notes on
Urinary
Analysis



.....BY.....

W. B. Canfield, M.D.

The demand for Dr. Canfield's book has compelled the publication of a

2d Edition, which is Now Ready.

The author says in his Preface: "In this edition changes and additions have been made to bring the book up to modern requirements." The book is what its title indicates—*practical*. Its 100 pages are packed with information concerning the general character of the urine; its normal constituents, organic and inorganic; its abnormal constituents; sediment, organized and unorganized; the condition of the urine in simple fever, nephritis both acute and chronic, contracted and amyloid kidney, diabetes, uremia, typhoid fever, cystitis, etc.; with a full description of reagents and apparatus. The principal object of the author has been to exhibit all the various *tests for discovering urinary constituents*: these tests are described briefly, but distinctly, and illustrated where necessary. "Besides drawing largely from his own experience, the writer has unhesitatingly made use of the literature on the subject."

The book contains eighteen illustrations, and, so far as typographical work is concerned, is far ahead of the first edition. It is issued in embossed paper covers; also in cloth. The price in paper, **25 cents**; in cloth, **50 cents**. Postage prepaid.

GEO. S. DAVIS, Medical Publisher,
 Box 470. - - - DETROIT, MICH.

THE **MEDICAL LAW**

LAWS OF 1892

✻ 1894

✻ ✻ 1896

ENACTED BY THE MARYLAND LEGISLATURE.

Sent to any address on receipt of 15 cents.

Maryland Medical Journal,

209 Park Avenue.

BALTIMORE.

PARKE, DAVIS & CO.'S

Anti-diphtheritic Serum

[ANTITOXIN]

Our Serum is absolutely sterile, and is put up in hermetically sealed glass bulbs. It is strictly fresh when it leaves the Laboratory, as we keep only a small quantity in stock, for we believe it is better to keep the horses well immunized, and draw from them as occasion demands.

Only young and carefully examined horses are used for producing the antitoxin. And we have never yet had reported a case of sudden death following the use of our Serum.

Our Serum has been officially examined and approved by the following State Boards of Health: Michigan, Massachusetts, Pennsylvania, California, and by the Ontario Board of Health; also by other important Boards of Health in the United States and Canada.

FOUR GRADES OF STRENGTH:

- No. 0. A serum of 250 units, for immunizing. White label.
- No. 1. A serum of 500 units, for mild cases. Blue label.
- No. 2. A serum of 1000 units, for average cases. Yellow label.
- No. 3. A serum of 1500 units, for severe cases. Green label.

Special Note.

The serums we are now producing are from three to five times as strong as could be had a year ago, and we expect to still further increase their strength. For this reason we list the serums according to the number of units and not according to bulk. The quantity to be injected is now only from 1 to 5 cc.

We also supply serums for tetanus, tuberculosis, and streptococcus diseases, as well as Coley's Mixture and the toxins of erysipelas and prodigiousus. We prepare different culture media, microscopic slides of disease germs, etc., a description of which will be furnished upon application.

Correspondence respectfully solicited.

Literature mailed upon request.



Parke, Davis & Company,

BRANCHES:

NEW YORK: 90 Maiden Lane.
 KANSAS CITY: 1008 Broadway.
 BALTIMORE: 8 South Howard St.
 NEW ORLEANS: Tchoupitoulas and Gravier Sts.

BRANCH LABORATORIES:

LONDON, Eng., and WALKERVILLE, Ont.

Manufacturing Chemists,

DETROIT, MICH.

Colden's LIQUID BEEF TONIC.

. . . SPECIAL ATTENTION . . .

of the Medical Profession is directed to this remarkable Curative Preparation, as it has been endorsed by THOUSANDS OF THE LEADING PHYSICIANS OF THE UNITED STATES, who are using it in their daily practice.

€ COLDEN'S LIQUID BEEF TONIC is invaluable in all forms of Wasting Diseases and in cases of convalescence from severe illness. It can also be depended upon with positive certainty of success for the cure of Nervous Weakness, Malarial Fever, Incipient Consumption, General Debility, etc.

COLDEN'S LIQUID BEEF TONIC

Is a reliable Food Medicine; rapidly finds its way into the circulation; arrests Decomposition of the Vital Tissues, and is agreeable to the most delicate stomach. To the physician, it is of incalculable value, as it gives the patient assurance of return to perfect health. *Sold by Druggists generally.*

The CHARLES N. CRITTENTON CO., General Agents,
Nos. 115 and 117 Fulton Street, NEW YORK.

WAMPOLE'S

PERFECTED AND TASTELESS
PREPARATION OF

COD LIVER OIL.

(OL. MORRH. COMP. WAMPOLE)

Contains a solution of the combined alkaloidal and other active medicinal principles, obtainable from one-fourth its volume of pure Cod Liver Oil, the oily or fatty portion being entirely eliminated. These principles are extracted from the oil while it is yet contained in the fresh Cod Livers, and combined with Extract of Malt, Fluid Extract Wild Cherry Bark, and Syrup of Hypophosphites Compound (containing Lime, Soda, Potassium, Iron, Manganese, Quinine and Strychnia).

COPY OF ANALYSIS :

Laboratory of ROBERT G. ECCLES, M. D., Brooklyn, N. Y., April 29th, 1896.
Messrs. HENRY K. WAMPOLE & Co., 441 Green St., Philadelphia, Pa.

GENTLEMEN:—A careful chemical examination of fresh Cod Liver Oil as found in fresh Cod Livers which I obtained direct from the Cod Fish, reveals beyond question the presence of definite alkaloids and other active medicinal principles therein.

An equally careful examination of your Cod Liver Oil Extract, used in the manufacture of your preparation of Cod Liver Oil, demonstrated beyond a peradventure the presence of *these same alkaloids* and the other medicinal substances extracted by me directly from the oil I found in the Cod Livers.

Finally another equally careful analysis of your finished product, "Wampole's Perfected and Tasteless Preparation of Cod Liver Oil," shows in an unquestionable manner the presence therein of *these same alkaloids and medicinal substances* from Cod Liver Oil, together with various hypophosphites, quinine, strychnine, wild cherry, etc.

An examination in detail of your process of manufacture and of the special machinery and apparatus used by you in extracting the combined alkaloidal and other active medicinal principles of Cod Liver Oil convinced me of their efficiency for just such work, and showed the care and pains taken by you to get a pure and useful product.

Very truly yours,

ROBERT G. ECCLES.

The clinical results obtained by the use of Wampole's Preparations will prove its efficacy in diseases and conditions where cod liver oil is indicated, in addition to its valuable tonic and alterative effect, due to its other medicinal ingredients.

Circular matter and samples for trial promptly and cheerfully furnished upon application, free of charge. Prepared solely by

HENRY K. WAMPOLE & CO.,

Manufacturing Pharmacists, No. 441 GREEN ST., PHILADELPHIA, PA.