

PART II.

REVIEWS AND BIBLIOGRAPHICAL NOTICES.

A Manual of Infectious Diseases occurring in Schools.
(Issued by the Association of Preparatory Schools.)
By H. G. ARMSTRONG, M.R.C.S., L.S.A., Medical Officer to Wellington College; and J. M. FORTESCUE BRICKDALE, M.A., M.D., Physician to Clifton College, Assistant Physician, Royal Infirmary, Bristol, Clinical Lecturer, University of Bristol. With chapters on "Infectious Eye Diseases," by R. W. DOYNE, M.A., F.R.C.S., Margaret Ogilvy Reader in Ophthalmology, University of Oxford; and "Ringworm" by H. ALDERSMITH, M.B., F.R.C.S., Medical Officer to Christ's Hospital. Bristol: John Wright & Sons, Ltd. 1912. Pp. 150.

THIS work is issued by the Association of Preparatory Schools for the assistance of masters and mistresses in dealing with cases of suspected infectious diseases occurring amongst their pupils. Though primarily intended for laymen, the book will be of real service to medical men engaged in school practice. Indeed, we think that it will be amongst the latter that its chief use will lie. In some respects the information given is too technical for the lay reader, and points are dealt with which would be much better left to the medical attendant. In a work of the kind this fault is well-nigh unavoidable, and we recognise the difficulties which confronted the able authors in their task.

The chapter on ringworm by Dr. Aldersmith is well worth perusal.

Supplement to the Quarterly Returns of the Marriages, Births, and Deaths Registered in Ireland during the Year 1911. Being Statistics regarding the Vaccination of Children whose Births were Registered in Ireland in that Year. London: Published by His Majesty's Stationery Office. 1913. Folio. Pp. 44.

WE regard this Supplement as one of the most important documents that has been published by the Registrar-General for Ireland for very many years. It is rendered all the more impressive by the absence of any commentary on the startling facts which it brings to light. Those facts, to our mind, constitute a very grave peril indeed to the welfare of Ireland. The mine is being laid, and all that is needed to cause an explosion of small-pox—that most loathsome of diseases—is that the fuse should be set alight by the introduction of a chance case from overseas.

From the Vaccination Statistics contained in the Supplement it appears that of the 101,758 children whose births were registered in Ireland during the year 1911, 73,856 were returned as having been successfully vaccinated; 2,990 as having had their vaccination postponed. In 151 cases the vaccinations were returned as unsuccessful on the ground of constitutional insusceptibility of the vaccine disease; 6,434 children died before vaccination; 4,518 were returned as “unaccounted for owing to removal from district or otherwise,” and 13,809 were reported as defaulters who had not been granted an extension of time under Form B., First Schedule. When expressed in percentages, it appears that 72.6 per cent. of the total were reported as successfully vaccinated; 2.9 per cent. were postponed on account of the children being unfit for vaccination; 0.2 per cent. were insusceptible of vaccination; 6.3 per cent. died before they were vaccinated; 4.4 per cent. were “unaccounted for owing to removal from district or otherwise”; and 13.6 per cent. were returned as defaulters.

The following table gives the condition as regards vaccination of the children whose births were registered in the year 1911, as compared with each of the preceding seven years:—

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TABLE I.—Showing particulars regarding the vaccination of the children whose births were registered in Ireland during each of the eight years, 1904–1911, with their percentage to the total births registered during each year.

Year	Successful Vaccinations (Form A, First Sched.)	Vaccinations postponed (Form B, First Sched.)	Insusceptible of Vaccine Disease (Schedule D)		Died before Vaccination	Unaccounted for owing to removal from District or otherwise	Defaulters who have not been granted an extension of time under Form B, First Sched.	Total Births Registered
			On the ground of Constitutional Insusceptibility of the Vaccine Disease	In respect of the Children already having had Small-pox				
1904	84,068	2,184	118	2	7,105	3,774	6,560	103,811
1905	84,326	2,505	90	–	6,624	3,625	5,662	102,832
1906	83,223	2,555	121	–	6,955	4,229	6,453	103,536
1907	81,841	2,360	88	–	6,656	3,567	7,230	101,742
1908	80,504	2,601	96	–	6,808	3,217	8,813	102,039
1909	80,455	2,715	118	–	6,651	3,884	8,936	102,759
1910	78,839	2,754	83	–	6,680	3,694	9,913	101,963
1911	73,856	2,990	151	–	6,434	4,518	13,809	101,758
	%	%	%	%	%	%	%	%
1904	81.0	2.1	0.1	0.0	6.9	3.6	6.3	100.0
1905	82.0	2.4	0.1	–	6.5	3.5	5.5	100.0
1906	80.4	2.5	0.1	–	6.7	4.1	6.2	100.0
1907	80.4	2.3	0.1	–	6.6	3.5	7.1	100.0
1908	78.9	2.5	0.1	–	6.7	3.2	8.6	100.0
1909	78.3	2.6	0.1	–	6.5	3.8	8.7	100.0
1910	77.3	2.7	0.1	–	6.6	3.6	9.7	100.0
1911	72.6	2.9	0.2	–	6.3	4.4	13.6	100.0

From a comparison of the figures relating to the provinces it appears that the successful cases of vaccination in the province of Leinster numbered 16,651, or 61.0 per cent. of the total births registered; in Munster the successful vaccinations numbered 16,512, or 70.2 per cent. of the total births registered therein; in Ulster the successful vaccinations numbered 30,858, or 82.6 per cent. of the total births registered; and in the province of Connaught the number of successful vaccinations reported was 9,835, or 72.3 per cent. of the total births registered.

Detailed information regarding vaccinations for the counties; superintendent registrars' districts (or poor-law unions), arranged by provinces and counties; registrars' districts; and superintendent registrars' districts, arranged alphabetically, will be found in Abstracts I., II., III., and IV., respectively, appended to this Report. Extracts from the notes presented by the Registrars are also published.

TABLE II.—Showing the number of successful primary vaccinations in Ireland during each of the years 1882 to 1911. [Extracted from Quarterly Reports.]

Year	Number of Successful Primary Vaccinations in each year	Year	Number of Successful Primary Vaccinations in each year	Year	Number of Successful Primary Vaccinations in each year
1882	107,613	1892	89,527	1902	94,303
1883	106,961	1893	88,695	1903	95,955
1884	105,021	1894	107,204	1904	91,976
1885	102,680	1895	92,227	1905	89,394
1886	97,137	1896	88,817	1906	90,171
1887	96,866	1897	89,732	1907	89,207
1888	93,520	1898	87,169	1908	88,576
1889	92,621	1899	84,937	1909	86,799
1890	93,368	1900	91,150	1910	88,698
1891	92,267	1901	88,520	1911	84,011

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In the foregoing tabular statement the number of successful vaccinations returned for each of the years 1882-1911 is given.

The following table shows the number of deaths from small-pox registered in Ireland in each of the years 1864-1911 :—

TABLE III.—Showing the number of deaths from small-pox registered in Ireland in each of the 48 years, 1864 to 1911.

Year	Number of Deaths registered from Small pox	Year	Number of Deaths registered from Small-pox	Year	Number of Deaths registered from Small-pox
1864	854	1880	389	1896	4
1865	461	1881	72	1897	3
1866	194	1882	129	1898	—
1867	21	1883	16	1899	1
1868	23	1884	1	1900	1
1869	20	1885	4	1901	2
1870	32	1886	2	1902	1
1871	665	1887	14	1903	40
1872	3,248	1888	3	1904	16
1873	504	1889	—	1905	5
1874	569	1890	—	1906	—
1875	535	1891	7	1907	1
1876	24	1892	—	1908	—
1877	71	1893	1	1909	—
1878	873	1894	72	1910	—
1879	672	1895	146	1911	—

It will be observed that the last record of mortality from small-pox in Ireland was in the year 1907, when one death was registered.

Forensic Medicine and Toxicology. By C. O. HAWTHORNE, M.D., F.R.F.P.S.G.; Lecturer on Forensic Medicine in the London School of Medicine for Women; Physician to the North-West London and Royal Waterloo Hospitals. Third Edition. London: Edward Arnold. 1912. Pp. 344.

WE have formed a high opinion of Dr. Hawthorne's work as being an excellent students' guide to Forensic Medicine. The style is clear and lucid, and the proportionate values of the various subjects treated appear to be well maintained. Hence it will be found to be an easy book to read and from which to make up the subject. The paper and printing leave nothing to be desired. It is much more difficult to condense knowledge and to choose wisely what is to be included and what omitted than it is to write a large and exhaustive book. We consider that Dr. Hawthorne has been quite successful in these respects. While the chapters on each subject are short, they are nevertheless reliable and sufficient.

We think that the author has, perhaps, attributed too little value to the precipitation test for blood. "These tests promise," he says, "to be of considerable medico-legal value in the hands of experts." We think that promise has been fulfilled. It might also have been well to mention that this test is not primarily one for *blood*; it will act with other fluids, such as semen, as well as with blood.

The Practitioner's Encyclopædia of Medicine and Surgery in all their Branches. Edited by J. KEOGH MURPHY, M.C., F.R.C.S. Second Edition. London: Henry Frowde, Oxford University Press, and Hodder & Stoughton. 1913. 4to. Pp. xxvi + 1443.

THE fact that a large edition of this work has been exhausted between September, 1912, and April, 1913, quite absolves the reviewer from making any laboured efforts in commendation. It is sufficient for us to congratulate Mr. Murphy on his success, and to express the opinion

that his work merits its continuance. An important feature in the new edition is the amplification of the index, a change that will make the work even more accessible than it was to the busy practitioner.

Dr. Ephraim McDowell, "Father of Ovariectomy": His Life and Work. By AUGUST SCHACHNER, M.D., Louisville, Ky. Reprinted from the Johns Hopkins Hospital Bulletin, Vol. XXIV. No. 367. May, 1913. 8vo. Pp. 17 and four Plates.

THE operation of ovariectomy has now become such a commonplace and safe procedure that it is difficult for us to realise the terrible condition of women with cystic ovaries in the early part of the last century. The tumours grew to an enormous size, and made the unfortunate woman's life literally a burden to her. While this was so, the operation of puncture, or tapping the cyst—the only means of giving relief—was attended with a frightful mortality. A. de Krassowsky, writing on this subject in 1868, states that in five years he operated in this way on forty-three patients, with one complete cure, one doubtful cure, and thirty-four deaths—the history of the remaining seven patients not being known. It was instead of the treatment that produced these results that the operation of ovariectomy was introduced.

Ephraim McDowell, who was the first to devise and to perform successfully this operation, was born in Virginia in 1771, and for a while studied surgery in Edinburgh under John Bell, but left the University without taking any degree. Tradition asserts that McDowell's forefathers had come to the North of Ireland from Scotland during the Commonwealth, and it is known that his great-grandfather assisted in defending of Derry against James II. in 1689. Subsequently, in the early part of the eighteenth century he emigrated to America, and settled in Virginia. Dr. Schachner denies the right of Ireland to make any claim to the ancestry of McDowell; but there is no doubt that his family was for many years

resident in the country, and the name has been well known and respected there for considerably more than two centuries.

The story of Ephraim McDowell's life and work has been told several times, but it will well bear repetition, and even yet it does not seem to be known as it should. Those of us who are old enough to remember the dread with which the operation of ovariotomy was looked upon in the seventies and eighties of the last century can appreciate the work of McDowell in 1809. As a previous biographer has said :—“ When we think of one living on the border of Western civilisation, in a little town of five hundred inhabitants, far removed from the opportunity of consultation with any one whose opinion might be of value, and nearly a thousand miles from the nearest hospital or dissecting room, performing a new and untried operation of such magnitude upon the living, before the days of anæsthesia, with a full sense of the responsibility and danger, without skilled assistants, our admiration for McDowell's courage and skill rises to its full height.”

We tender our thanks to Dr. Schachner for his work in perpetuating the fame of such a man.

How to diagnose Small-pox. A Guide for General Practitioners, Post-Graduate Students, and others. By W. M'C. WANKLYN, B.A. Cantab.; M.R.C.S., L.R.C.P., D.P.H.; Assistant Medical Officer of the London County Council, and formerly Medical Superintendent of the River Ambulance Service (Small-pox) of the Metropolitan Asylums Board. With Illustrations. London: Smith, Elder & Co. 1913. Demy 8vo. Pp. xi + 104.

THE early diagnosis of small-pox is a matter of grave importance, not only because of the appalling character of the disease in its more malignant forms, but because of the risk to the community if the disease should not be recognised at the very start of an outbreak.

The author is well qualified for his self-imposed task

in writing this book. He was formerly Medical Superintendent of the small-pox receiving stations and river ambulance service of the Metropolitan Asylums Board, and is now an Assistant Medical Officer of the London County Council. In these responsible positions he gained an experience of small-pox which must be almost without a parallel. It extended over twenty years, and has been based on the revision of the diagnosis in about 10,000 cases certified as small-pox and sent from London in the epidemic of 1901 and 1902 to the small-pox receiving stations in the Thames. Experience so vast and wide must command attention. But, apart from this, the book is written in such an easy style and in such simple and colloquial language that it is quite refreshing to read its well-leaded, large-typed pages. We suppose we must accept without demur the colloquial verb "diagnose" in lieu of the grammatical form "diagnosticate."

Dr. Wanklyn is somewhat iconoclastic in his views. In arriving at a diagnosis he properly postpones the patient's medical history to the last. "It seems to me," he writes (page 29), "that, if the man is accused of small-pox, so to speak, and you are to judge and sentence him, the evidence which ought to weigh most with you is your own direct observation, and the reading of what is before you." "To be groping about for a history is to lean upon rotten supports which you are better without. Sir George Murray Humphry used to say, of examining cases in general, 'Eyes first. Hands next. Tongue last and least.'" (Page 34.)

We do not go so far with him when he minimises the diagnostic value of the "shottiness" and "umbilication" of the rash of small-pox. He reverses the order of these words, so erring against chronology. His words are: "It is a characterisation absolutely wide of the mark for purposes of diagnosis" (page 36). This is going too far, but we agree with the author that it has been the practice to attach more importance to these characters than they deserve. Dr. Wanklyn further dismisses with scant courtesy the further classical sign of "loculation"—"the

small-pox vesicle is *said to be* multilocular and the chicken-pox vesicle to be unilocular." We agree with him that this "is not always the case," but we do not agree with him that the point is of little assistance in practice—at least in the vesicular and early pustular stages of the small-pox eruption.

Curiously enough, in the other direction, Dr. Wanklyn, to our mind, lays undue stress as a diagnostic of small-pox on the fact that the rash especially favours sites of irritation. This is perfectly true, but such a distribution of the rash peculiar to other eruptive fevers such as scarlatina and measles and also chicken-pox is quite common. The principle of "*ubi irritatio, ibi affluxus*" was recognised long ago. The opposite holds good also, for Dr. William Stokes based his preventive treatment of pitting in small-pox on the observed fact that the rash was scanty and the inflammation slight over portions of the body-surface the vascularity of which had been reduced. Stokes's paper was published in the fifty-third volume of this Journal in the year 1872. It is replete with sound, practical advice.

The author very properly alludes to early and extreme prostration as a feature of severe small-pox. He considers that it is a characteristic feature, which may be of material assistance in diagnosis. But we must remember that this symptom is common to small-pox, typhus and pneumonia.

As to differential diagnosis, Dr. Wanklyn mentions (Chapter VIII.) that in the year 1902, of 7,842 cases certified in London as small-pox, and sent to the Receiving Stations, 607 were found not to be small-pox. We are not surprised to find 203 cases of chicken-pox among the number. "Generally speaking," writes Dr. Wanklyn, "the resemblances between small-pox and chicken-pox are very remarkable; so much so as to suggest they are descended from a common ancestor" (page 90). To this suggestion we cannot subscribe, while we admit that striking resemblances exist between the two diseases. "The conclusion is that there is no single touchstone for the differentiation of small-pox and chicken-pox."

While this is true, at least a dozen valid reasons may be advanced to show that these diseases are entirely distinct.

Dr. Wanklyn rightly lays stress on the diagnostic and prognostic significance of the so-called "bathing-drawers" rash ("eruption de caleçon de bain") in purpuric small-pox. The distribution in the groins of this ominous initial rash is well shown in a series of diagrams inserted between pages 84 and 85.

The subject-matter of the book is further illustrated by a number of telling photographs of small-pox and chicken-pox, and by a chart showing the prevalence of small-pox in London between 1885 and 1912.

J. W. M.

Diseases of the Mouth: Syphilis and Similar Diseases.

For Physicians, Dentists, Medical and Dental Students. By PROFESSOR DR. F. ZINSSER, Director of the Department of Dermatology at the City Hospital, Lindenburg; Dozent at the Academy for Practical Medicine, Cologne. Translated and Edited by JOHN BETHUNE STEIN, M.D.; Professor of Physiology at the New York College of Dentistry; late Instructor in Genito-Urinary Diseases at the College of Physicians and Surgeons (Medical Department of Columbia University), New York City. With 52 coloured and 21 black and white illustrations. London: Rebman, Ltd. Pp. 269 + xvi.

THIS is an excellent work upon the subject of which it treats. For descriptive purposes the book may be said to consist of two parts. The first sixty-seven pages consist of a *résumé* of the modern literature of syphilis, and it constitutes an efficient exposition of the subject. The second portion of the book partakes of the nature of an atlas of venereal and other pathological conditions affecting the mouth and throat. The book supplies a want, and a very distinct one, for those who have not opportunities for observing in their routine practice the important conditions which the illustrations depict. It will furnish medical and dental practitioners not only with a clear, concise,

and ample monograph on syphilis, but also with the means of readily distinguishing the lesions produced in the mouth and throat by this disease from those due to other pathological causes, and, further, it will incidentally enable the precise nature of the latter to be similarly diagnosed.

The following are some of the conditions illustrated and described in the work before us:—Gummatous perforations, mercurial ulcerations; lichen ruber planus; idiopathic polymorphous erythema; herpes labialis; aphthous ulcer; follicular tonsillitis; syphilitic tonsillitis; Plant-Vincent angina; mycotic tonsillitis; the geographical tongue; leukoplakia; tuberculosis of the mucous membrane of the hard palate; tuberculosis of the fauces, soft palate and uvula; cancer of the tongue; gumma of the tongue.

We found Professor Zinsser's book interesting and instructive, and have pleasure in recommending it to our readers.

S. S.

The Modern Hospital: Its Inspiration; its Architecture; its Equipment; its Operation. By JOHN ALLAN HORNSBY, M.D., and RICHARD E. SCHMIDT, Architect. With 207 Illustrations. Philadelphia and London: W. B. Saunders Company. 1913. Svo. Pp. 644.

IT is not often in this country that any one has the opportunity of designing or building a modern hospital, and in most instances one has to be content with the adaptation of existing buildings to the requirements of modern medicine and surgery. Even when opportunity does occur, the available funds are usually so limited that one has to be content with a building which too often is far from satisfactory. It is probably due to this lack of opportunity that so little attention has been devoted to the problems of hospital building in this country. Whether this be the true explanation or not, it is quite evident that very few of those who have the management of our hospitals have ever set themselves to understand or to solve the many problems of efficient hospital con-

struction and equipment. Yet surely these problems are worthy of the most careful study, for the efficient and economical working of the hospital largely depends on its proper construction and equipment at the outset. The great difficulty, of course, lies in the fact that medical men who are to use the place know little, if anything, of architecture, and the architects who undertake the construction seem to know nothing of the needs of those who are to use their building.

In the book before us some attempt has been made to overcome this difficulty, and Dr. Hornsby, who, as Secretary of the Hospital Section of the American Medical Association, has had considerable experience of hospital management, has associated with him Mr. Richard E. Schmidt, an architect of considerable experience. The result of this collaboration is to afford a mass of material on almost every point in connection with hospital building and equipment. The work, of course, largely embodies the individual experience of the joint authors, and as such will not receive universal acceptance, but it is the experience of individuals who have closely studied the subject and are ready to give reasons for the faith that is in them. Even the most minute details have been considered, and plans have been accepted or rejected as they may have been found useful or otherwise in practice. An instance of this may be seen in the section dealing with vacuum cleaners. Having described the various methods for using this means of removing dust, the authors go on to say "hospital administrators need not expect to cut down their cleaning by other means when they install vacuum cleaners. The same amount of hand cleaning will have to be done. In short, the vacuum cleaner is a most attractive device theoretically, and has more good 'talking points' than almost any other hospital convenience."

In such a wealth of material it is impossible to particularise, but we should recommend all those who have to deal with the administration of our hospitals to consult this book before they decide on any plan of reconstruction or equipment of the hospital under their charge.

The Prospective Mother. By J. MORRIS SLEMONS.
London: D. Appleton & Company. 1913. Cloth 8vo.
Pp. 343.

THE author of this book has in view the thorough instruction of the educated mother in both the hygiene of pregnancy and also the preparation for the confinement itself. The book treats of the whole subject in a wonderfully simple and explicit style, avoiding technical terms other than those which are explained; but many members of the general public would be rather alarmed at so much instruction being given. To a sensible, well-educated woman the book should prove most interesting, however, and will impart knowledge in a pleasant, easy way.

Diseases of Women: a Clinical Guide to their Diagnosis and Treatment. By GEORGE ERNEST HERMAN, M.B., F.R.C.P. Lond., F.R.C.S. Eng.; Consulting Obstetric Physician to the London Hospital; Consulting Physician-Accoucheur to the Tower Hamlets Dispensary; late President of the Obstetrical Society of London and of the Hunterian Society, &c. Enlarged Edition, revised by the Author, assisted by R. DRUMMOND MAXWELL, M.D. Lond., F.R.C.S. Eng.; Assistant Obstetric Physician to the London Hospital and Physician to Queen Charlotte's Lying-in Hospital. With 8 Coloured Plates and 292 figures in the text. London, New York, Toronto, and Melbourne: Cassell & Co., Ltd. 1913. Pp. xiv + 899.

THE main alteration in the new edition of Dr. Herman's work is the introduction of Dr. R. D. Maxwell to help in the revision of the parts of the book relating to operative technique. For the most part Dr. Maxwell's descriptions of operations are good, though often they are somewhat sketchy. The rest of the book is as it has always been, and needs a very thorough revision to make it descriptive of modern gynæcology.