the colonies are greyish-white, granular, and glistening. In gelatine stab cultures the colonies are white. At the *post-mortem* examination, nineteen hours after death, cultures were taken from the spleen and from the thrombus in the longitudinal sinus. The agar tube inoculated from the spleen, after a week's incubation, was still sterile. The culture from the longitudinal sinus gave a pure culture of the bacillus described above. This organism resembles in all points that described by Schimmelbusch as associated with cancerum oris. That described by Lingard is, perhaps, the same.

Dr. Symes forwarded a tube to Mr. Plimmer, hoping that some inoculation experiments might be made, but unfortunately the tube was broken and contaminated in transit, and cultures failed; but the organism was identified by Mr. Plimmer as that described by Schimmelbusch. Fig. 2 is a

Fig. 2.—Cultivation on agar. (Hartnack : Leitz's oil immersion, $\frac{1}{4}$.) drawing I made of these bacilli.

REFERENCES.

¹ Schimmelbusch, *Deutsch med. Woch.*, 1889. ² Ranke, *Jahrb. f. Kinderheilk.*, 1888.

HEREDITARY DIGITAL ABNORMALITY.

By D. YOUNG, M.D.,
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A CASE of abnormality of the thumb having come under my notice some time ago, I instituted inquiries as to the occurrence of similar conditions in near relatives, with the result that the following remarkable series of cases was elicited. The hereditary tendency is abundantly demonstrated, and it is rather interesting to note that the peculiarities have been transmitted almost invariably from the paternal side.

First Generation.—The earliest instance which can be recalled in this family is in the paternal great-grandfather. He had what the family calls "straight thumbs;" this term may be retained, and I offer a few words in its explanation, as three of the descendants presenting it have come under my own observation. The terminal joint is ankylosed, and both phalanges are broad, as if two thumbs had been begun to be formed, producing, however, single flat phalanges with a single broad nail; the first phalanx, moreover, is longer than normal, while the terminal phalanx is short.

Second Generation.—His sister's son (nephew) has grown up with two distinct thumbs on each hand, so that probably the condition goes back to five generations. His daughter has the right thumb bent in like a claw, and his son has "straight thumbs."

Third Generation.—The son last mentioned has a son with "straight thumbs;" the daughter has five children, three of whom are affected; two sons have "straight thumbs," and the daughter an enlarged right thumb turned in (clawed). In the two other sons I know of no defect.

Fourth Generation.—Of these two sons, who themselves did not present the abnormality, one had a boy with double-webbed thumbs on each hand, upon whom I operated successfully, and the other a boy with webbed fingers. One of the sons who had "straight thumbs" has a family of eight, three of whom are affected. The first child (boy) had two distinct thumbs on each hand, and was operated upon by Dr. Turnbull, of Cambuslang, the remaining thumbs being "straight." He is a violinist, and in tuning his instrument catches the keys between the metacarpal bone and hand; in addition, he has on each foot a double-webbed great toe with two nails. The sixth child (girl) had two distinct thumbs on each hand, separate metacarpal joint for each, on whom I operated successfully, and she also has double-webbed great

toes. The eighth child (boy 3 weeks old) has "straight thumbs," the terminal joint, however, being a little mobile. I have advised the parents to exercise it; he has also double-webbed great toes. Thus one man with "straight thumbs" transmits through the next three generations digital peculiarities to at least eleven descendants. It would be interesting to know the results which might follow intermarriage of any of these.

MEDICATED WINES.

By FREDERIC C. COLEY, M.D.,

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I HAVE been very glad to have seen more than once of late in the *BRITISH MEDICAL JOURNAL* protests against the general use of certain fluids largely advertised under the name of medicated wines. There are two classes of such preparations which I think it is not only our duty to avoid recommending, but against which we should warn our readers with the greatest earnestness, and be prepared to explain our reasons for so doing.

The first class to which I allude are called coca wines, compounds which consist of a wine of considerable alcoholic strength (generally, I believe, claiming to be either port or sherry), with the soluble parts of coca, or else a salt of cocaine dissolved therein. Coca and its chief alkaloid, cocaine, are drugs which possess some power of removing the sense of fatigue, just as analgesics remove the consciousness of pain. But they no more remove the physical condition of muscles and nerve centres of which the sense of pain gives us warning than a dose of morphine which relieves the pain of toothache removes the offending tooth, or even arrests the caries in it. The truth of this will be obvious to anyone who remembers enough of physiology to know what fatigue really means. A muscle which is tired out is different chemically from the same muscle in its more normal condition, when it is ready to respond vigorously to ordinary stimuli. It has lost something and is besides overcharged (poisoned, in fact) with the products of its own activity, and it can only be restored by a fresh supply of the material which it requires, and the carrying away of the poisonous waste products. Fatigue of nerve centres is no doubt strictly analogous to fatigue of muscles.

It is practically impossible for us by voluntary exertion to reach the degree of absolute fatigue which the physiologist produces by electric stimulation of a nerve-muscle preparation. The sense of fatigue becomes so intense that voluntary effort cannot overcome it, just as no man can produce asphyxia by simply holding his breath, because the *besoin de respirer* becomes irresistible; but it is quite possible for a narcotic to so dull the sensory part of the respiratory reflex mechanism as to permit asphyxia to take place.

The sense of fatigue and the *besoin de respirer* are both Nature's danger signals. Drugs which hide such signals from us are a more than doubtful benefit. If it were possible for us to suppose that a fraction of a grain of cocaine could afford to exhausted nerve centres and muscles the nutriment which they require for their restoration, and at the same time eliminate the poisonous waste products, then it would be reasonable to prescribe the drug for use by all who are over-