ART. XIII.—*A Treatise on the Principles and Practice of Medicine, designed for the Use of Practitioners and Students of Medicine.* By AUSTIN FLINT, M.D., &c. &c. Second Edition, Revised and Enlarged. Philadelphia, 1867. Pp. 965.

THIS is the second edition of a work which has obtained a very rapid sale in the United States. The former issue was exhausted in four months, a remarkably short time for a large volume addressed to a limited class of readers, if we compare it with the ordinary sale of scientific books in the old country. It seems that a text-book on medicine was much wanted in the class-rooms of the transatlantic schools and colleges; and there were few authors, perhaps none in America, better qualified to produce one than Dr. Flint. Our examination of the book has given us a very favorable idea of it as a whole; but, as it would be impossible in the space available for this notice to give a detailed account of its contents, we prefer calling attention to those portions of the work which have been added in the second edition, and to one or two passages contained in it which appear to us likely to interest English practitioners.

The article on Pyæmia in the present edition has been rewritten, and may be taken as affording a fair specimen of the character of the information which Dr. Flint's book contains. It gives the reasons for and against the old hypothesis of the absolute entrance of pus corpuscles from without, and the theory of transport of pus, which gave rise to such names as "purulent deposits" and "metastatic abscesses." Dismissing these views as no longer tenable, the author gives a very clear and good *résumé* of the light which Virchow and his school have thrown upon the hypothetical absorption and transmission, and on the theory of the so-called suppurative phlebitis as the cause of pyæmia. Dr. Flint especially insists upon the vagueness of the information hitherto derived from the microscope in the study of this disease. The close resemblance if not identity of the pale blood-corpuscle and the pus-corpuscle might make it at present impossible to discriminate by the microscope alone between leucocythæmia and pyæmia; and it is doubtless to this close resemblance of the two kinds of corpuscles that the discrepancies in the views of modern observers are to a considerable extent due. He concludes

"That a morbid condition of the blood exists, giving rise to the phenomena which have been considered as belonging to pyæmia is not to be doubted; but there is no proof that the presence of pus-

corpuscles has anything to do with the production of these phenomena. As already stated, experiments on inferior animals show that the phenomena attributed to purulent infection of the blood may be produced by injecting pus-serum without the pus-corpuscles." (P. 91.)

A somewhat brief account of the symptoms of the condition named pyæmia, and of the treatment applicable to it, in which however the experiments of Prof. Polli with the alkaline sulphites are given full prominence, concludes the section.

Whooping cough is a disease which, as it is generally treated of in works on diseases of children, was passed over in the first edition. In the present one the author has given a succinct account of its symptoms, pathology, and causation, in which, as might be expected, we fail to find anything very new. The only point in his summary of the various plans of treatment pursued in pertussis which struck us as novel, is a mode of using atropia in that disease, recommended by Dr. Brown-Séquard. At a meeting of the American Medical Association in May, 1866, that physician asserted that whooping cough might be cured in three days by giving atropia in doses large enough to produce delirium, and continued so as to keep up that condition for three days, except at night, when the patient is to be quieted with morphia or codeia. We do not wonder that Dr. Brown-Séquard ingenuously added, that he found difficulty in getting the parents to submit to this mode of treatment by an induced delirium of three days' duration. Moreover, he allows that this plan of treatment will only cure the neuropathic symptoms; the bronchitis remains after it is discontinued.

General cerebral paralysis, or the paralysis of the insane has obtained a notice in this edition which it did not receive in the former. The author prefers the term general cerebral paralysis to that of paresis on the ground that the latter "is applied by writers to paralysis dependant on a functional condition of the brain or cord, and he believes that the disease in question is always associated with organic change in the brain." He also objects to the designation "paralysis of the insane" the fact that cases may present all the features of the paralysis without mental derangement. Not only this fact, but post mortem records prove to our minds that whilst a group of cases may be classed together under the term general cerebral paralysis, it will, in reality, include not essentially one, but many pathological conditions. The author relates that of Austin's twenty-six cases, in twenty-two the optic thalami were *either* softened, indurated, atrophied, hyperæmic, or anæmic, whilst the soft commissure, fornix, septum lucidum, corpora albicantia, crura

cerebri, and corpora striata, were either usually or frequently implicated. On the other hand, from the examination of fifteen cases, and their comparison with fifteen other cases of mental disease, Sankey was led to conclude that sub-arachnoid effusion increased vascularity of the pia mater, adhesion of the pia mater to the cortical substance, open convolutions, injection and abnormal firmness of white substance, dark colour of grey matter, and a varicose condition of the cortical substance of the cerebral hemisphere, were common if not constant conditions in the general paralysis of the insane. May it not be expected that when cerebral pathology has advanced as much as renal and pulmonary, the cases now classed as general cerebral paralysis will resolve themselves into as distinct pathological groups as have Bright's disease, and pulmonary phthisis.

A section on Polyuria or Diabetes Insipidus, in which Dr. Flint has made use of Roberts's valuable analysis of seventy-two cases, is also new. Dr. Flint describes a case which terminated fatally at the Bellevue Hospital in which, as in one of the fatal cases collected by Roberts, the kidneys presented almost entire destruction of the secreting substance, and had the appearance of empty sacs. The ureters were greatly dilated, and the walls of the bladder hypertrophied. The patient was a man *æt.* forty-two; diuresis and excessive thirst had existed for two years. The sp. gr. of the urine was 1008. It was free from albumen and sugar. The patient died comatose; the brain, lungs, and heart were not diseased.

One interesting passage in the book refers to the alcoholic treatment of phthisis which, as our readers know, has gained considerable favour in North America. Dr. Flint gives the particulars of two cases of arrest, one being that of a man aged 42, the other that of a young lady. In each a pint of whiskey was taken daily for a very long period; in the case of the young lady for two years. Dr. Flint acknowledges that this treatment does not answer in many cases, and that it is only upon a fair trial that the effect of alcohol in any case can be adjudged. With regard to the signs of usefulness or hurtfulness in any case the author believes, from his experience, that if the immediate effect of alcoholic stimuli be that of a cordial, if they produce a sense of comfort, and a greater disposition to exercise, and if they do not excite unduly the circulation and nervous system, benefit from their use may be expected. The limitation as to quantity must be determined by their effects. He has observed that a remarkable tolerance of alcohol is induced in certain cases of phthisis.

On meeting with foreign books on medicine the reader turns with interest to the descriptions of the diseases of the so-called

zymotic class. In the case of Dr. Flint's book he will not be disappointed. Under the head of continued fevers two epidemics of interest are described, one of so-called erysipelatous fever, which prevailed in New England, the middle Western and Southern States from 1841 to 1846. In some localities large numbers were affected, and the mortality was large. The fever was popularly known as "the black tongue," and by Dr. H. N. Bennett, who described it, was believed sometimes to follow the direction of rivers, small streams, and lakes. Pharyngitis, tonsillitis, with occasional sloughing, laryngitis, and in some cases, œdema glottidis were observed. Erysipelas occurred in about one-sixth of the cases, and was apt to lead to gangrene and sloughing. Puerperal peritonitis prevailed uniformly with the epidemic. The other epidemic fever mentioned by Dr. Flint was characterised by mild erythematic pharyngitis, and prevailed in the State of New York in 1857. This affection seems to have been neither scarlatina nor diphtheria, but bore an analogy to influenza except that the pharynx was attacked, and not the schneiderian and bronchial mucous membrane.

It will be remembered that cerebro-spinal meningitis or spotted fever has, on several occasions, made its appearance in various parts of the United States. We were, therefore, surprised not to find the disease treated of, under the head of fevers. Dr. Flint prefers considering it amongst the diseases of the nervous centres, and gives as a reason its anatomical characters which separate it from typhus, and its symptomatic phenomena, which are to a large extent due to inflammation of the brain and spinal cord. We must confess we think this an error of arrangement as the history of the epidemics of the disease, its local prevalence, its evidently toxical character as shown by the ecchymoses which have given it one of its popular names, and its rarity as a sporadic affection seem to affiliate it clearly to the zymotic class.

In taking leave of Dr. Flint's book we would add that although it is mainly a compilation, as all works of its kind must necessarily be, it is a good one. We think it not unworthy to take a place in the same category with Watson, Wood, and Aitken.