

potatoes 14 oz., fruits 16 oz. = 1,465 grains albumen. The latter diet Dr. Haig tells us is very useful for those who persistently find deposits of urates and red sand in their urine. On the other hand, he considers that the "rheumatism" which is often met among the vegetarian natives of India is largely due to pulses and cereals used in excess to the exclusion of fresh fruit and vegetables.

For the benefit of those who may wish to see how such a Spartan fare works out in actual practice, we quote the following *menu* for the day:

Breakfast.—1 pint milk, with fresh fruit, plantains, apples, &c., as appetite allows.

Lunch.—Vegetable soup (made without meat).
Milk, 1 pt. (drunk during the meal).
Potatoes, with butter.
Cheese (2 oz.) eaten with the potatoes.
Stewed fruit.
Fresh fruit.

Dinner.—Much the same as lunch.

The author claims that not only will this diet keep a man healthy and 'fit,' but even do for athletic training. The author claims that recent events in the athletic world have proved that men trained on such a dietary are superior in power of endurance to men trained on the flesh of animals.

It is impossible for us here to enter on a discussion of the big subject of vegetarianism. Such a diet as Dr. Haig recommends (using only milk products from animals) is very much the same as the diet of millions in India, and we must all admit that, for them, it is eminently suitable, and that great feats of endurance have been performed on such food; but this does not necessarily imply that it is wise for civilised man in a European climate to change his method of dietary. Whatever man may have been originally, he is now in Europe an omnivorous eater; his digestive apparatus is more nearly allied to that of carnivora than to that of the herbivora; and we believe that in the wear and tear of existence now imposed upon modern nations, with a tenfold increased demand upon the brain and nervous system, it has become necessary for them to take their food in such a way as will economise the work of the stomach, and this, we believe, will more readily be done by the use of the more concentrated animal food than by using the more bulky vegetable food suited rather to the comparative quiet of an Oriental's life.

Memorandum on *Ascaris Lumbricoides* in the Cannanore Central Jail.—By Capt. C. F., FEARNSIDE, M.A., M.B., Madras, Government Press, 1897.

THIS is an interesting and valuable pamphlet by Dr. C. F. Fearnside (now of the Central Jail, Rajahmundry), on the results of his investigations into intestinal worms as a cause of bowel complaints in the Cannanore Central Jail. Be-

fore Dr. Fearnside took charge, the death-rate from bowel complaints was very high for many years; in 1893 no less than 47 per mille was the death-rate from bowel complaints alone. Dr. Fearnside's attention was drawn to worms as a probable cause of part of this excessive mortality by an autopsy he made in 1894, when in a case of diarrhoea anæmia and dropsy, he found a mass of 37 round worms at the ileo-cæcal valve. Acting on this hint, he resorted freely to the use of santoinin, and *post hoc* or *propter hoc*, the number of cases of diarrhoea, enteritis and dysentery were at once enormously reduced. There is no reason to suppose the year 1896 in any way exceptional, yet in that year 255 prisoners passed no less than 2,703 worms, or about ten each.

Other entozoa are very prevalent also on the West Coast of India, e.g., filaria, anchylostoma and other commoner parasites. In fact, the people of that part of India seem effected to an equal extent with those of Assam or of the Saran district in Bengal.

We have not space to follow Dr. Fearnside in the many interesting details he gives of the prevalence, life-history, and symptoms of these parasites in Cannanore. His theory of a toxin is very probable, and his remarks on infection, re-infection and auto-infection are very interesting to all who have studied helminthology. On the whole, we consider Dr. Fearnside has made out a good case against these intestinal worms as one cause, in certain districts, of bowel complaints among prisoners. We would have liked to have seen a comparison between the prevalence of worms among the newly admitted and among prisoners several years in jail, for, with the strict conservancy system in force in Indian jails, prisoners should have little opportunity for re-infection. We strongly recommend our readers to get the pamphlet and read it.

A Century of Vaccination and what it Teaches.—By W. SCOTT TEBB, M.A., M.D. (CANTAB.), D.P.H., Surgeon to the Boscombe Hospital, London. SWAN SONNENSCHN & Co., 1898. (8vo, pp. 448, 6s.)

WE do not for a moment doubt the sincerity of the motive which prompted Dr. Tebb to publish this sweeping condemnation of vaccination and compulsory laws. It is to be regretted, however, that only those statistics and arguments which suit his own views and purposes have been made use of. Dr. Tebb in his preface admits that he does not reject or even attack the belief that in certain diseases the attack affords some degree of immunity against a second, and that he cannot tell whether the modern inoculation secures immunity but grants that it does for the sake of argument. He does deny, however, that an attack of cow-pox secures immunity against small-pox, and refers to the investigations of Dr. Creighton and Professor Crookshank, who say that cow-pox is radically different from