

ART. VII.—*Morbid Conditions of the Throat in their Relation to Pulmonary Consumption.* By S. SCOTT ALISON, M.D., &c.
London: 1869. Pp. 61.

THIS little brochure will be read with interest and instruction as being the production of a physician of long and large experience in the subject it deals with. It must, at the same time, be confessed that it presents little that is new or unnoticed by every careful observer of disease.

Throat ailments are, in the author's opinion, seldom or never true precursors of phthisis, and the addition of "important throat affections of pulmonary consumption adds seldom to the danger of the patient, but exposes him to grave inconvenience." He, moreover, regards laryngoscopy, when too specially pursued, as a cause of concomitant chest disease being overlooked, and the whole illness referred to the throat affection.

The simulation of consumption by throat diseases is, however, the principal subject of the essay. He passes under review the ordinarily recognised affections of the pharynx, larynx, and trachea causing cough and other general signs of phthisis, adding, indeed, one morbid condition not so well known, viz., "constriction or narrowing of the trachea immediately above its bifurcation. . . . This narrowing gives rise to difficulty in inspiration as well as in expiration." And, apparently regardless of the active dispute prevailing respecting the causes of emphysema, he adds naively: "It is this condition of narrowing which so frequently leads to emphysema of the lungs—a state occasionally associated with tubercle. The expiratory effort is opposed by the obstruction offered to the column of air in course of expulsion, and the tender walls of the air-vesicles give way, dilate, coalesce, and give rise to" the symptoms of asthma. The pathological nature assigned to the black particles occurring in the spectrum derived from the tracheal glands, as being organic productions, carbonaceous corpuscles secreted as such, lays claim, we think, to little more attention than the simple theory of emphysema put forth.

However, whilst the author keeps to facts derived from clinical observation, he may be safely followed, and several excellent lessons in the differential diagnosis of phthisis and throat affections deserve to be borne in mind. For instance, "venous murmur and basic blowing" are, in Dr. Alison's experience, rather phenomena of the anæmia of some throat affections than of phthisis. Again, the absence of "an interrupted or divided friction-like sound or rhonchus" at the apices of the lungs is a very valuable piece of negative evidence of the non-pulmonary tubercular character of the malady.

This sound is "heard best above, between the scapula and the clavicle, at the scapular region, and it is sometimes most audible at the head of the humerus. . . . It is very inconstant; heard now, it may be inaudible in a few minutes. It may continue for days, then stop for hours, but to return with certainty, and remain with slight intervals until the tubercular deposit shall be absorbed or become softened, and give rise to cavernules and cavities." (P. 30.)

In the diagnosis of the constricted state of the trachea he principally relies on auscultation in the region of the suffering organ. The respiratory sounds are rendered high-pitched by it, and this alteration is most pronounced in the immediate locality of the constriction, although audible all over the neck. The best instrument for arriving at this diagnosis is the author's differential stethoscope, as this instrument obviates pressure on the neck, and allows the employment of its two limbs simultaneously or in succession.

Though dealing with throat affections, he makes no attempt to distinguish or to describe those many lesions of the larynx and adjoining parts, which the votaries of the laryngoscope have so industriously made out as possibly existing. At the same time, however, he pronounces it incumbent on the practitioner to employ the laryngoscope.

The chapters on treatment are sufficient in direction and detail, but do not offer material for extract, or calling for special remark. Considered as addressed to the profession, this book must rank as an isolated chapter in the history of consumption; and, so far as the novelty of the information contained in it is concerned, it might have been compressed within the bulk of an ordinary communication to a medical journal.

ART. VIII.—*Companion to the last Edition of the "British Pharmacopœia," &c., with Practical Hints on Prescribing.* By PETER SQUIRE, F.L.S., &c. In 8vo. Seventh Edition. London. 1869.

THE arrival of a work as the seventh edition is an argument for its need, and for its having satisfactorily supplied that need. The work before us has attained to this unusual position, and consequently its plan and purpose, and mode of performance, being all so thoroughly well known to the profession no extended notice of it is called for. A book of the sort, forming a sort of dictionary of drugs, would require a very pains-taking reviewer, to discover in it all the changes effected in the details of its composition in each successive edition; and so, out of consideration for the much oppressed class of reviewers, the author has graciously set forth in the prefaces