

much doubt that half, or nearly half, of what he gave was absorbed. It will generally be found that the excreta are simply loaded with the extra quantity. As to the fact, he notes that no very strong purgative was required. I have found that when—as in septicæmia—large doses of iron are being taken, and probably producing some constipation, as soon as I have felt my way to and doubled the dose of the drug, the bowels cease to give trouble, and it may be that these doses—a great deal of ferruginous matter not being absorbed—in passing off as waste act as a slight irritant. Whatever the rationale, such is the fact.

VIRCHOW TESTIMONIAL FUND.

The following additional subscriptions have been received:—

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PRIMARY AND SECONDARY CAUSES OF DEATH.

MR. A. R. BARNES, M.B.ED. (Boreham, near Hastings) writes: Anent an article in the BRITISH MEDICAL JOURNAL of March 20th, there is a class of cases in which death, though perhaps apparently primarily due to an accident, may also with equal probability be assigned to a natural cause. An individual of advanced years falls down and hurts his hip, there may be no fracture, but he or she may take to bed and after a few weeks die. The primary cause of such a death is, I think it may reasonably be said, a natural one; namely, senile decay; but for senility the fall would not have happened, or if happening would not have caused a condition of things leading on to death. The injury should, I think, be described in such cases as the proximate or secondary cause of death.

ADHERENT MEMBRANES.

DR. H. T. BATCHELOR (Queenstown, Cape Colony) writes: Every textbook describes the adherent placenta, but I have not seen any reference to the possibilities of adherent membranes except in Spiegelberg's *Textbook of Midwifery*, published by the New Sydenham Society. On February 1st, 1888, I confined a woman, and find this note appended to the case: "Placenta removed whole; membranes adherent and left." The membranes were torn off from the circumference of the placenta, which was fibrous. Some portion of the membranes protruded through the os uteri, and were firmly attached to the uterus within the os, at the lower segment. It was found impossible to do more than get away the non-adherent portion, the attachment of the remainder being so firm. We often hear of the dangers of leaving a portion of the membranes behind, and I wish to express the belief that this accident may be due to its being adherent. In this case nearly the whole of them were adherent, and left because they could not be separated. This woman got well in about four weeks, though her safety was endangered by bad nursing.

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BOOKS, Etc., RECEIVED.

Materia Medica and Therapeutics. By J. Mitchell Bruce, M.A. Aberd., M.D. Lond. London: Cassell and Co. 1891.
Kemp and Co.'s Prescriber's Pharmacopœia. Second Edition. Bombay and London: Kemp and Co. 1891.
Modern Abdominal Surgery (The Bradshaw Lecture). By Sir T. Spencer Wells, Bart., F.R.C.S. London: J. and A. Churchill. 1891.
The Comparative Climatology of London and the Chief English Health Resorts. By Bertram Thornton, M.R.C.S., L.R.C.P. London: H. K. Lewis. 1891.
Elements of Practical Medicine. By Alfred H. Carter, M.D. Sixth Edition. London: H. K. Lewis. 1891.
A Manual of Diseases of the Nose and Throat. By Procter S. Hutchinson, M.R.C.S. London: H. K. Lewis. 1890.
Die Tetanie. Von Dr. Lothar v. Frankl-Hochwart. Berlin: August Hirschwald. 1891.

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