of these great institutions was not charity at all. Hospitals, such as theirs, were the schools in which our noble medical and surgical professions acquired the skill which they subsequently used, not only for the relief of patients within their walls, but in every home and every formits. It was therefore to the in home and every family. It was, therefore, to the in-terest of every individual that these great institutions should be maintained in a satisfactory way, and that no difficulties of a financial character should be allowed to impede them in their great work.

Dr. Thomas Richard Fraser, of Edinburgh Univer-sity, has been appointed by the India Office president of the Commission to inquire into the plague in India. The other commissioners are Professor Wright Netley, Dr. Rouffer, chief of the Sanitary Department at Cairo, and Messrs. Hewitt and Cumine, of the Indian Civil Service. They will leave this month. Dr. Fraser is a leading expert in the germ theory of diseases.

The vacancy in the Regius Professorship of Medicine in Dublin University, caused by the resignation of Sir John T. Banks, K.C.B., has not yet been filled. The post, which is regarded as the blue ribband of the medical profession in Ireland, involves some severe sacrifices. Its holder must resign all hospital appointsacrifices. Its holder must resign all hospital appoint-ments and all professorships, either in the School of Physic or any other School. The appointment is believed to lie among three Dublin Physicians-Dr. James Little, Dr. J. M. Finny, and Sir Francis Cruise.

The annual report of the National Hospital for Consumption for Ireland, founded for the reception of patients suffering from pulmonary consumption from all parts of Ireland, without distinction of creed, is especially interesting at the present time, when the question of the prevention, and the early treatment of phthisis is so prominently before the public. An in-teresting paper is also published by Dr. B. H. Steede, M.D., Resident Physician, containing Meteorological and other statistics, with regard to the hospital. and other statistics, with regard to the hospital.

The Report is full of encouragement, and as a result of the year's experience the Board feel no hesitation in urging the claims of this Hospital as an Institution which has fulfilled their expectations. They also ac-knowledge the ability and energy displayed by Miss J. G. Powell, Lady Superintendent, Dr. B. H. Steede, the Resident Medical Officer and Registrar, and by the staff generally.

It is stated by an observer of pure atmospheres that microbes are absent from the air of the Swiss mountains at a height of 2,000 ft.

The oddest domicile on earth, says the *Leeds Hos-pital Gazette*, is that recently erected at Yokohama by an eminent German bacteriologist. It is a microbe-proof house, built of glass blocks. There are no win-dow sashes, and the doors, when closed, are air-tight. The six supply is forzed into the room through a pipe The air-supply is forced into the room through a pipe and filtered through cotton wool to cleanse it of bac-teria. To ensure further sterilization, the air is driven against a glycerine coated plate glass, which captures all the microbes the wool spares. The few microbes brought into the house in the clothes of visitors soon die in the worm analytic truth which the house in die in the warm sunlight with which the house is flooded.

Professional Review.

BLAKE, "ON THE HAND."

WE have received from Mr. Henry J. Glaisher, of 57, Wigmore Street, Cavendish Square, W., a copy of a booklet, by Dr. Edward Blake, "On the Study of the Hand for Indications of Local and General Disease, price 25. 6d. net. The book will, we think, be fascin-ating to those nurses who take an interest in reading the outward and visible signs of the disease and the condition of their patients.

There is much on the surface of things which, to the general public, is illegible, but to the experienced nurse is an open book, and, in a casual glance round a nurse is an open book, and, in a casual glance round a ward of sick people, she will be able, rightly, to estimate the diseases from which many of her patients are suffering. She need not study the head-boards, for instance, to know which is a case of heart disease, which is phthisis, and which Addison's Disease, pneumonia, or enteric; each exhibit unmistakable characteristics.

But this fact goes to prove that one only sees what one has eyes to see, and, as the language of the hand is, to a great degree a foreign one to nurses, it follows that any book which helps them to translate it will be of extreme interest to themselves, and most helpful to them in accurately observing the symptoms of their patients. We commend it, therefore, to those nurses who take an intelligent interest in their patients, and who take an intelligent interest in their patients, and who are willing to take trouble to study anything which will help them to observe and report accurately upon the symptoms of those under their charge. The book is well illustrated, and the illustrations add not a little to the clearness of the text. The purpose is, as stated in the introduction, "to give a small instalment of the very large amount of general information that may be clearned from a patient study of the hand itself" may be gleaned from a patient study of the hand itself." The different conditions of the hand, and their pathological significance are therefore described in detail.

For instance the various causes which may make a hand hot or cold, dry or moist, clammy and tremulous hand hot or cold, dry or moist, clammy and tremulous are explained, next the points that may be learnt from its colour and texture are dealt with. There is the "woolly hand of imbeciles," the swollen hand, pitting on pressure, which if bi-lateral and wax-like, speaks of renal disease, if unilateral indicates axillary aneurism, adenoma, or traumatism. The different spots, which may be symptomatic of various diseases, are also described described.

The notes on the nails are also of extreme interest. For instance, the slate-grey discoloration of the finger nails in malaria, is scientifically explained. "The hot and cold stages of ague correspond with the fission of the malarial protozoon At this point a large pro-portion of the hœmatin has been destroyed by protozon, and converted into a melanic material, which is set free by the disintegration of the protozoon." These conditions explain the grey look of the nails. The mode of nail growth is also described, as well as the various parasitic affections. The geographical distribution of skin diseases on the surface of the hand is also commented on, as well as its general contour. The secretions, and sensation, are dealt with as well as many other points of interest. It will be seen, therefore, that there is much to learn from this treatise,



