

a map showing the localities in the United States where the disease has appeared from 1668-1874. "The conceded home of yellow fever is in the West Indies and the Bahamas, with a portion of the adjacent continents of North and South America. A square formed by the 45th and 100th degrees of longitude, and the 35th north and the 5th south latitude, will include the favorite region of this disease. Although originating within the square named, history shows that it may prevail on the sea coast in any locality within the tropics, north and south of the equator, where malarial fevers prevail, and the daily average of the thermometer is over 75 or 80 degrees, with a high dew point for weeks or months together." There are, no doubt, other conditions than those of continued high temperature with moisture, of a purely sanitary and preventive character, which favor the existence and propagation of this great scourge of the tropics. It has been observed that once the disease becomes epidemic it can exist and preserve its grave form at a much lower temperature than seems to be required for its origin.

### Advantages of Legal Control Over Prostitution.

The classical work of Parent Duchatelet, on *Prostitution in Paris*, contains this passage:—"If legislation cannot render men virtuous; if it cannot correct the judgment and repress the impetuosity of passions which appeal to their senses too loudly to leave them the consciousness of duty; at least, it may meet the danger to which the imprudent expose themselves, and, for the sake of these men's wives and children, look after the health of the guilty in order to preserve the innocent. I will go further, for I maintain that it ought to do so, and that those who have neglected this important duty have been unfaithful to their trust, and can only be excused by their ignorance of the benefits of the sanitary surveillance of prostitution."

### NOTES AND COMMENTS.

## The Home of Yellow Fever.

The following extract is from a paper by Dr. J. M. Toner, entitled, "The Distribution and Natural History of Yellow Fever, as it has Appeared at Different Times in the United States," read before the American Public Health Association, in the city of New York, in the fall of 1874, and published in the report of the Surgeon General of the Marine Hospital Service of the United States for that year, with

### The Urine in Nephritis.

M. Albert Robin, of Paris, has pointed out two previously unknown characters of the urine of interstitial nephritis. 1st. The presence in this liquid of a notable quantity of urohæmatine. 2d. The existence, under the microscope, of crystalline, or amorphous pigmentary masses, and of garnet masses, probably formed of hæmatoidine.

## Character of the Yellow Fever in Memphis.

A private letter from that plague-stricken city says—

This disease is yellow fever, or is, in fact, the malarial fever of this coast, intensified by the introduction of the germs of ship or Asiatic fever. It is the most subtle scourge the world has experienced, and baffles all medical experience. A person of intelligence, when first attacked with the malarial symptoms, if he be administered to at once, with the usual treatment, wrapped up in blankets and nursed carefully, may pull through. None but the rich can, in times like the present, command special attention. The masses are treated by the wholesale, and all alike; few recover.

The first symptoms are heaviness and a slight chill, then suppression of the urine, puffed face, glassy eye, beautiful flushed skin, pink eyelids, pulse 120, temperature 103 to 106. Soon vomito begins, which is simply a slight hawking sound and spitting of a coffee-ground substance from the stomach, which sinks to the bottom of the vessel. The patient, after each emission, feels well and would get up if allowed. No pain, no evidence of concern, either by look or action. The pulse begins to run down to 90, 80, 70, 50, 40; then comes the pinched nostril and mechanical breathing. They sit up; want to get up; are induced to lie down, and quietly pass away.

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