

## Book Reviews.

**PULMONARY TUBERCULOSIS.** By MAURICE FISHBERG, M.D., Clinical Professor of Medicine, New York University and Bellevue Hospital Medical College; Attending Physician, Montefiore Home and Hospital for Chronic Diseases, New York. Second Edition, Revised and Enlarged. Philadelphia and New York: Lea & Febiger, 1919.

A REVIEW of the first edition of this work appeared in the *MEDICAL RECORD* of June 17, 1916. The present—second, revised and enlarged—edition differs from the first inasmuch as there is an addition of 100 pages, the author having abbreviated some chapters and added three more, one on tuberculosis of the pleura, one on spontaneous pneumothorax, and one on differential diagnosis of pulmonary tuberculosis. Although there is nothing new offered in these chapters, the whole book as well as the additions show a vast clinical experience and wide reading on the part of the author. The entire subject of tuberculosis—etiology, diagnosis, prognosis, and treatment—is discussed at length. The author's discussion of the relation between influenza and tuberculosis is interesting, although it is far from clear what his point of view is. He says in his first paragraph of his chapter on the subject: "When a tuberculous person is stricken with influenza the outlook is not invariably bad," and in the following paragraph he says: "Clinically, we find that when a consumptive is subjected to an attack of influenza, the process in the lung is liable to extend, and acute exacerbation of the process is likely to occur, which either kills the patient or turns a chronic, and comparatively innocuous, process into a subacute one, and finally to a fatal termination." In other words, anything and everything is possible to the tuberculous when he contracts influenza. The author fails to discuss the statement made by many sanatorium physicians that the influenza bacillus and the tuberculosis bacillus are apparently antagonistic to each other.

Fishberg is strongly of the opinion that tuberculous infection is not acquired by adults and he disregards infection as a factor in phthisiogenesis, particularly in adult life. To the mind of the reviewer it is regrettable that he again quotes Saugmann's statement as authoritative, saying that "It is not dangerous for healthy adults to be coughed at by patients suffering from pulmonary or laryngeal tuberculosis." Even if it should not be dangerous for a healthy adult to be sprayed with tuberculosis bacilli, the question always arises, "When is a man healthy?" There are still too many evidences of infection in adult life to consider precaution in the disposal of sputum superfluous. Fishberg claims that his "unconventional" views on the prophylaxis of phthisis, which he emphasized in the first edition, have been confirmed by the experiences of the various armies in the recent world war. Yet, according to available statistics, the armies and the population suffered most from tuberculosis in countries where antituberculosis hygiene and antituberculosis teaching have been virtually unknown, as, for example, in Russia, Austria, and Serbia, or where antituberculosis propaganda has been in vogue a comparatively short time, as in Italy and France. The English and American armies, where tuberculosis hygiene had been taught, suffered least, and it may be safely said that it is largely due to the continuous and vigorous antituberculosis propaganda in our country, including the teaching that careless expectorating results in the dissemination of the disease, that our morbidity and mortality from this disease have been decreasing faster than in other countries. Fishberg's contention that the decrease of tuberculosis mortality is not due to precautionary measures hardly holds good, and it would seem that he contradicts himself when he says, under caption "Real Causes of the Decline in the Tuberculosis Mortality": "We must never forget in this connection that the modern methods of prevention aim at but one thing: the prevention of infection. And in this they have utterly failed." But in this very paragraph he admits that the inauguration of general hygienic and sanitary measures and the improvement in housing conditions have all been of assistance in the decline of the mortality from tuberculosis.

In this new edition Fishberg has somewhat modified

his views of psychic traits of the tuberculous, but he still favors such extreme views as expressed by Saxe, and repeats the unwarranted and cruel statement that "the ascendance of selfishness plays the most important rôle in the moulding of the mental traits of the tuberculous." The author seems to be entirely oblivious to the fact that our greatest authorities on tuberculosis, such as Laennec and Grancher of France, Brehmer and Dettweiler of Germany, Trudeau and King of this country, all were tuberculous, and distinguished themselves by their unselfishness and devotion to suffering humanity. The vast majority of tuberculosis specialists in this country who volunteered and served in the American army in the great world war have been or are still tuberculous. Who would dare to ascribe to these noble men anything but self-sacrifice and devotion to high ideals? Aside from these criticisms, the book may well be recommended as worthy of careful study by the specialist, general practitioner, and student of medicine. It is admirably printed and profusely illustrated.

**RULES FOR RECOVERY FROM PULMONARY TUBERCULOSIS.**

By LAWRASON BROWN, M.D. 192 pages. Philadelphia and New York: Lea & Febiger, 1919.

In this little volume of 180 pages the well-known author gives most valuable advice to patients suffering from tuberculosis. All the vital subjects, such as rest, food, outdoor life, attention to symptoms, the patient's relation to his physician, and directions for his personal and general hygiene, are clearly and precisely given. The mottoes and proverbs which head each of the twenty-six chapters reveal a pleasing and rare literary style. Want of space permits us to give only a few of the most striking ones. The motto for the chapter "On Alcohol and Tobacco" is, "Abstinence is as easy to me as temperance would be difficult." From the lengthy motto "On Fresh Air" we quote the following: "The best medicine! Two miles of oxygen three times a day. This is not only the best, but cheap and pleasant to take. It suits all ages and constitutions. It is patented by Infinite Wisdom, sealed with a signet divine. It cures cold feet, hot heads, pale faces, feeble lungs, and bad tempers." "On Cultivating an Outdoor Hobby and On Recreation" it says, "Better to hunt the fields for health unbought, than fee the doctor for a nauseous draught." "On Patient and Physician," "To be trusted is a greater compliment than to be loved." The last chapter in the book gives a table of nearly all the solid and liquid food substances which a tuberculous patient may eat, stating at the same time their protein and caloric values. The author finally adds a generous list of all the well-known popular books on tuberculosis, which he gracefully designates as: "My never failing friends are they, with whom I converse day by day." Brown's *Rules for Recovery* may be safely recommended to all tuberculous patients.

**THE EARLY TREATMENT OF WAR WOUNDS.** By Col. H. M. W. GRAY, C.B., C.M.G., M.B. Aberdeen, F.R.C.S. Ed., Consultant in Special Military Surgery, Late Consultant Surgeon, British Expeditionary Force, France. Pp. 299, with 25 illustrations. New York: Oxford University Press, American Branch, 1919.

FOR three and a half years the author served as Consultant Surgeon in France; the first eighteen months at the base, the last two years with one of the armies. Thus he was enabled to see a great deal of work under all sorts of conditions and could choose, from an almost boundless experience, the methods of wound treatment and operative technique that seemed to give the best results. Since this book was written while the war was still going on, with no definite indication of its early conclusion, and while field and base surgeons had but little time for reading, the author felt that brevity and conciseness were demanded; hence the meat is here, stripped of unnecessary verbiage. When treatment varies at different points from the line to the base, the subject is covered in appropriate sections recognizing these differences. The lessons of the war, as regards thoracic surgery, for example, are well set forth. There is much information that will be equally useful in handling traumatic lesions of peace times, although the book as a whole is essentially devoted to the problems encountered under war conditions.