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 The Pulse

 REPRESENTING THE

 STUDENTS, ALUMNI AND FACULTY

 OF THE

 UNIVERSITY OF NEBRASKA COLLEGE OF MEDICINE

 Vol. VIII
 MAY 20, 1914

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THE OATH OF HIPPOCRATES

I swear by Apollo, the physician, and Aesculapius, and Health, and All-heal, and all the gods and goddesses, that, according to my ability and judgment, I will keep this oath and stipulation: to reckon him who taught me this art equally dear to me as my parents, to share my substance with him and relieve his necessities if required; to regard his offspring as on the same faoting with my own brothers, and to teach them this art if they should wish to learn it, without fee or stipulation, and that by precept, lecture and every ather mode of instruction, I will impart a knawledge of the art to my awn sons and to those of my teachers, and to disciples bound by a stipulatian and oath, according to the law of medicine, but to none others. I will follow that method of treatment which, according to my ability and judgment, I consider for the benefit af my patients, and abstain from whatever is deleterious and mischievous. I will give no deadly medicine to anyone if asked, nor suggest any such counsel; furthermore, I will not give to a woman an instrument to produce abortion. With purity and with holiness I will pass my life and practice my art. I will not cut a person who is suffering with a stone, but will leave this to be done by practitioners of this work. Into whatever hauses I enter I will go into them for the benefit of the sick and will abstain from every voluntary act of mischief and corruption; and further from the seduction of females or males, bond ar free. Whatever, in connection with it, I may see or hear in the lives of men which ought not to be spoken abraad, I will not divulge, as reckoning that all such should be kept secret. While I continue to keep this oath unviolated, may it be granted to me to enjoy life and the practice of the art, respected by all men at all times; but should I trespass and violate this oath, may the reverse be my lot.

SENIOR NUMBER

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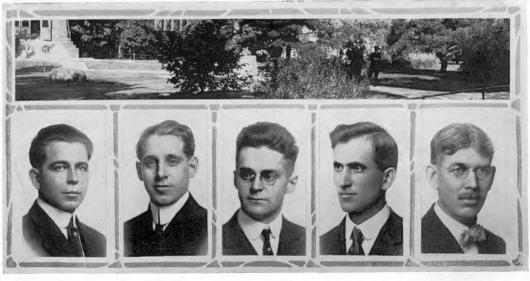


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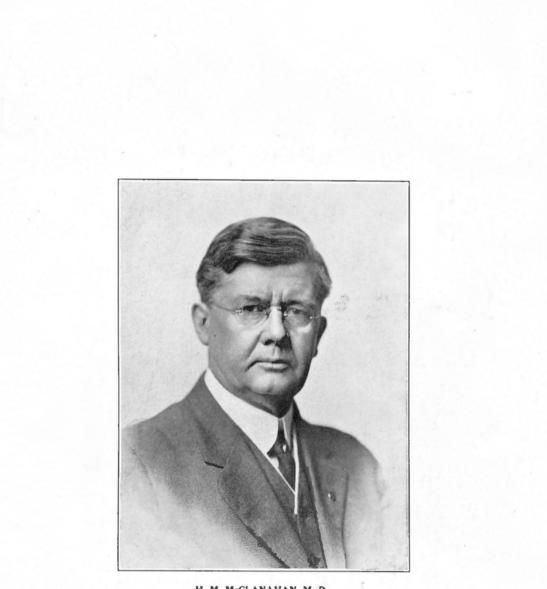
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UNIVERSITY OF NEBRASKA COLLEGE OF MEDICINE



H. M. McCLANAHAN, M. D. Professor of Pediatrics.



CONGENITAL HYPERTROPHIC STENOSIS AND PYLORO-SPASM

By Dr. H. M. McClanahan, Professor of Pediatrics.

It is indeed remarkable that so many cases of stenosis of the pylorus have been reported within the last ten years and so few cases in former years. It must be that the greater number of cases reported are due to a more careful study of the diseases of infants, not that the condition is a new one. Like scurvy, this condition probably passed unrecognized. By congenital hypertrophic stenosis is meant a thickening of the pylorus chiefly of the muscular layer, this thickening at the expense of the lumen. In two cases, that I have seen, the circumference of the pylorus was not larger than normal, yet the lumen was entirely closed. As practically all these cases occur within the first two months of life, and indeed many of them within the first three weeks, it is reasonable to believe that the condition is congenital. Thompson of Edinburgh has reported a case of stenosis in an infant born at the seventh month of intra-uterine life. This being a fact, it is remarkable that few cases give symptoms just after birth. It is rare, as I have said, to have symptoms before the third week. It seems reasonable that in these cases there was a considerable degree of hypertrophy at birth and that the stimulation of the normal functions of the stomach by the ingestion of food rapidly causes an increase in the hypertrophy and consequent stenosis.

In the normal stomach there is a special development of the circular muscular fibers toward the pyloric end. The line of separation between the antrum pylori and the body of the stomach is made apparent by this thickening, so that the pyloric end is called the "sphincter antri pylorici." "Under certain conditions such as vomiting or stimulation of the vagus, this sphincter may be contracted with such force as to separate the antrum entirely from the fundic end of the stomach." In normal digestion owing to the contraction of the pyloric sphincter and the reduplication of the mucus membrane, the lumen is closed and food is entirely shut off from the alimentary tract. When food is carried forward to the pylorus there is a relaxation and a certain portion of the food is ejected with considerable force into the duodenum, then the pylorus closes. It is believed that the acid chyme when forced into the duodenum causes a closure of the pylorus by reflex action, that when this chyme becomes alkaline in the bowel there is again a relaxation of the pylorus. Recent experiments with the X-Ray have abundantly proven the above physiologic facts.

Symptoms of Pyloric Stenosis.

1. Vomiting. The vomiting that usually occurs in the normal infant is more of a regurgitation. This is quite frequent in over-fed infants. In stenosis the vomiting is projectile in character, but is free from pain. Usually once or twice in twenty-four hours the infant will vomit large quantities of food, showing that it has retained several feedings. This is a very constant and significant symptom. These infants are always hungry and take food greedily.

2. Steady and Progressive Loss in Weight. This symptom in an infant taking food and without temperature is an important one.

3. Character of the Bowel Movements. After a few days of vomiting the discharges consist almost entirely of mucus and bile due to the fact that practically no food passes into the intestines. When in a given case there is no evidence of milk digestion in the stools, then the diagnosis is almost certain. In any suspicious case the stools should always be kept for inspection and examination.

4. The Peristaltic Wave. This is a very characteristic symptom. Some authorities consider it pathognomonic. The writer has seen eight proven cases of hypertrophic stenosis. This symptom has been present in each one. There may be a slight peristaltic wave in pyloric spasm, indeed there is in some cases, but we have the absence of other symptoms to guide us. The wave is best seen soon after the infant has taken nourishment. It begins at the left side and travels across the epigastium. Usually there are two or three waves in succession. These waves occur every five or ten seconds and by personal observation I have known them to last for fifteen minutes. The wave can generally be elicited by gently stroking the abdomen.

5. Palpable Tumor at the Pylorus. Still of London reports being able to palpate the tumor in 41 out of 42 cases. Kerley of New York states that in 24 cases seen by him he was not able to palpate the tumor in many of them. The writer has not been as successful as some in demonstrating it in all of his cases. When it is remembered that the stomach of the infant is nearly covered by the left lobe of the liver, it is easy to understand why palpation of so small a mass is difficult and often impossible. Inability to palpate the tumor is certainly not a proof that pyloric stenosis does not exist.

6. Dilation of the Stomach. This can usually be demonstrated by palpation. It has been proven by the X-Ray.

7. Absence of Other Evidence of Sickness. There is no temperature, no symptoms indicating central nervous trouble, the urine is always scanty due to the lack of absorption of the foods, and the child appears ill only on account of the wasting.

In making a diagnosis pyloric spasm without hypertrophy should be considered. The writer has seen four cases of pyloric spasm that have closely simulated stenosis. The fact that these cases ultimately recovered and are now normal is to the writer's mind proof that they were not cases of stenosis. In a case reported by Morse of Boston he makes the following statement: "The fact that the baby is breast-fed

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is a point in favor of stenosis, while the pain during and after vomiting is in favor of spasm. The explosive vomiting, the constipation and the progressive failure are symptoms common to both conditions and are, therefore, of no importance in differential diagnosis. The presence of a tumor points strongly toward stenosis, because a tumor is much more often palpable in stenosis than in spasm. The intermittent contraction and relaxation of the tumor never occurs in stenosis, however, and is most characteristic of spasm. The presence of this sign justifies, therefore, a positive diagnosis of **spasm of the pylorus**."

Again in pyloro-spasm there are certain times during the day when food passes through the pylorus, hence there will be evidence of milk digestion in the stools. This in the writer's opinion is the most important distinction between the two conditions. In pyloro-spasm the vomiting is usually associated with evidence of pain. In pyloro-spasm there is loss of weight for a time, but so long as there is evidence of milk digestion in the stools the physician is justified in waiting and watching. In pyloro-spasm treatment is of decided benefit. This consists in :

1. The Diet. It is a strange fact that some of these cases occur in breast-fed infants and that sometimes it is better to stop the breast milk and give artificial food. Whey is the most valuable food owing to the fact that the proteids are soluble and do not form tough cheesy masses in the stomach. Condensed milk in the proportion of one to twenty of whey can be added with benefit. The use of lime water is the most important part of the treatment. This should be given ten or fifteen minutes before each feeding or nursing. After nursing, $\frac{1}{2}$ drop of tineture of belladona or 1-1000 of a grain of atropia may be given. Hot packs applied after nursing and continued for half an hour are of benefit. If these measures fail and if the stools cease to contain milk digestion, then recourse should be had to surgery.

2. Diagnosis. Diagnosis is important for the reason that modern surgery can save many lives. True hypertrophy is hopeless without operation. The diagnosis should be made as early as possible in order that the infant may have the benefit before wasting is extreme.

Recent statistics show a greatly lessened mortality in operative cases, due no doubt to two facts:

1. Early recognition of the nature of the condition so that the child is subjected to the operation before emaciation has become extreme.

2. Improved surgical technique.

Of the eight proven cases seen by the writer two died without operation and the diagnosis was proven by the autopsy. Six were operated upon, three recovered and are now well, and three died. Of the three fatal cases one succumbed in a few hours from the shock, the other two lived respectively six and seven days. The one dying from internal hemorrhage, the other undoubtedly from peritonitis.

In conclusion: In view of the increased knowledge due to the study of these cases of indigestion by the X-Ray examination, it is the writer's opinion that pyloro-spasm will in time become a clinical entity.

FROM THE ONE HORSE CHAISE TO THE AEROPLANE

Dedicated to the Class of 1914 from the Experience of a Century Past.

In the stormy time of the Spanish war In the Autumn of Ninety-eight, I seriously thought of myself at par And dreamed of my growing great.

> I started out with the Century's dawn, "Making hay" as I "blew my horn." Each night saw a trophy securely won With another in sight, each morn.

The Public shouted, "Oh Hurry! Come! My father has threw a fit, The hired girl's fainted, my wife has swooned, Our baby's about to quit."

And, fool that I was, I fretted and flew, I feared I would be "too late," Or "the other fellow" would beat me to A case in this terrible state.

O many a horse I've driven to doom, For many a ''blow out'' paid repair, And now, when my life should be at its Noon, I ''stand in the gloaming with none to care.''

To you of the Nineteen-fourteen class, So far better fitted to bear the load Than were we, I say:—''Let a little green grass Grow under your feet,'' while the Public goad And jostle you here,—there's time to spare, Don't heat up your horses or ruin your car, Let your 'plane soar smoothly along ''up there'' ''With your chariot hitched to a learned star.''

If "the old man's dying," why he'll be dead, So sip your beverage and chew your bread, Let your automobile bowl smoothly along, While you sleep sound sleep in your starry bed, For if it's "the child," he'll soon be well, The wife will have rallied from her "spell," And all that you need is to get the price, For giving good measure and "sound advice." Then let your aeroplane soar o'er head, While you sleep sound sleep in your starry bed, And you'll have youth and health, with your wealth and fame. The Public will bless you,—you spared yourself.

If the old man's dying, he'll sure be dead, So sip your beverage and chew your bread, Let your auto purr as it glides along While you whistle a happy cheerful song,—

Except, just this, when you race with the Stork, Let your air-buggy blow out her belly with work! Neither mother nor baby nor stork will need you, But you need the Needful, so FLY straight through!

-An Alumnus.

WHO'S WHO IN THE SENIOR CLASS

Who is it often stands aloft,

And into space does gaze? Who goes about with tread so soft,

And "Ned" will never raise? Who would not kick at a tin can?

This "Sleuthfoot" Pinckney man.

Who is it when in infancy

With name was loaded down,

But in philosophy of love

Has later gained renown? His skinny, narrow form has charms, Charles Wesley Warren ''Plato'' Harms.

Who is it is the jovial one? He thinks he has T. B.

Who's always in for laugh and fun, Wherever him you see?

Who for his efforts gets returns? Out "Fat Boy," "Bobby" Burns.

Who of this sheet is Senior ed.? I speak of him with care,

Because of him it has been said

By Osler he does swear. It's safe to say he is not dull,

This fellow Erskine, "Cull."

Who is it came from "Pennsy's Wood," And now is at the "Wise"?

He is a lad of genial mood,

Yet much to our surprise,

There are some things which stir his ire; Why, "Backup" "Beany" Moyer.

Who is it when to mention work, He always likes to cuss,

But get him in society,

The girls he sure does fuss?

Who has the cheerless attitude? Frank Kotlar, "Gloomy Gus."

Who is it's rather small in size And not of heavy weight?

Because of duties which arise,

At school he's always late. When it comes to hustling, who is there? This Gramlich man called Square.

Who is it noted for his speed, He says he likes to "blow"? "The Sporting World" he loves to read,

The latest points to know.

Who is it never "gets in bad"? This Dexter King, called "Dad."

Who is it strives for fancy grades, The woman with the whining voice? 'Gainst many odds her way she's made,

And "scrapped" the "roughneck" boys. Who works the deal for sympathy?

"Widow" Williams, M. C.

Who is our noble president?

A pleasing man, "you bet." Who oft is off on pleasure bent,

For which he time does get?

A worker, too, is our "Cap,"

That "Baldy" Goodnough, "Jack."

Who is it in scholarship does lead, And so ranks very high?

Who "crabbed" on many of our feeds, So busy—that is why?

Who's it at tennis is no slouch? Why "Brigham" Young, our "Grouch."

Who's always heard when he's around, And whom we're glad to hear

Because his presence does abound With wittiness and cheer?

Who's called "Bushwah" and all such talk? Charles Franklin Moon, our "Chuck."

Who is it, known as "Father Time," The venerable author of this rhyme? If you don't like it, "you should worry," It was not written in a hurry. If he has erred, he means no ill,

Apologies from Scholten, "Bill."



Dr. J. C. Waddel, '10, of Pawnee City, writes to remind us that he is still in this state and not located at Paton, Iowa, as stated in a recent issue of The Pulse. His letter is full of encouragement and proves him to be a loyal and wide-awake alumnus.

E. J. Olson, '10, of Lexington, Neb., was a visitor at the college building one day last week.

F. A. Burnham, '11, expects to join the ranks of the benedicts in June.

Dr. William Anderson, '10, will leave for Germany the first of July. He expects to spend a year in study in Vienna.

Dr. Willis H. Taylor, '11, will spend a year in Vienna, and about six months in the New York Lying-In Hospital. He expects to sail from New York on the 11th of August.

Dr. John B. Potts, '07, is planning on spending his summer months in Virginia.

The secretary of the alumni association advises you to correct your alumni roster as follows:

Herbert A. Abbot, '96, is now located at Douglas, Wyo.

Emil C. Black, '03, is now located at San Diego, Cal. W. W. Frank, '98, is now located at Glenwood Springs, Colo.

P. E. James, '02, is now located at Elkhorn, Ia.

H. C. Pederson, '05, is now located at Farwell, Neb. N. W. Spencer, '99, is now located at Sioux Falls, S. D.

C. D. Nelson, '09, is now located at Seward, Neb.

The secretary would like the addresses of the following alumni: F. J. Driver, '95; Louise Frese, '87; Robert Monteith, '82; D. B. Mc-Mahon, '98; Florence Neal, '98; Marie Nielsen, '03; John W. Roe, '84; James W. Leach, '82; J. E. Somerville, '95; Ulrich D. Stone, '92, and A. C. Youngman, '84.

John A. Fuller, '06, and wife, of Los Vegas, Nev., are visiting Mrs. Fuller's parents in Omaha.

Dr. C. W. Poynter will spend three months in the Harvard Anatomy laboratories this summer preparing his courses for next year's classes. He expects to bring back with him several new models and new methods of laboratory instruction that are being employed in the East.

Among other innovations, Dr. Poynter is planning to furnish the coming Freshmen and Sophomore classes with photographic outfits for the purpose of taking pictures of dissections (an original idea, by the way), thus saving the time spent in drawing. It is his opinion that sufficient time is occupied in the other courses in scientific drawing and he believes that the present plan is better for anatomy.

There will be a course in Junior Anatomy next year, the purpose of the course being to take up the special anatomy of the pelvis, eye, ear, nose and throat. This will permit the gynecology department, obstetric department and eye, ear, nose and throat departments to start in with their regular lectures. Miss Warner is now preparing charts for this course. Dr. Poynter is very much pleased with the results of his practical examinations this year and intends to give his examinations in the same way next year.

The laboratories for Histology and Embryology will be better equipped in several respects for the work of next year's Freshman class than they were at the beginning of this year. Gas and electric table connections are now installed in the general laboratory, making artificial light available for microscopic work. This is important in view of the fact that the laboratory sessions will be in the afternoons instead of in the mornings, as they have been this year. Complete facilities for optional technique work will be provided in the general laboratory, and for this purpose a new electric incubator for embryology has been ordered. This will be convertible into a paraffin bath for later histological technique. One of the smaller laboratories has been provided with dark shades so the projection microscope may be utilized in the section conferences and guizzes. A larger projection microscope is provided for the lecture room, which will be equipped during the summer with a darkening device similar to that of the large lecture room on the first floor. Mr. Sherwood will devote a part of the summer to the interests of the department in preparing class material and demonstrations.

MEDICINE

Little drops of water, Little grains of sand Buy the doctors autos To speed them o'er the land.

THE PULSE STAFF takes this occasion to call your attention to their efforts of the past year and solicit your earnest patronage for the coming year. We thank you for your support in the past and trust that you will give The Pulse your assistance during the coming year. Let us all give our best efforts in support of our college paper and thus make it a worthy exponent of our alma mater. PUBLISHED SEMI-MONTHLY UNIVERSITY OF NEBRASKA COLLEGE OF MEDICINE 42nd and Dewey Ave., Omaha, NEBRASKA

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Here we are free To be good or bad, Sane or mad, Merry or grim As the mood may be,---Free as the whim Of a spook on a spree,-Free to be oddities, Not mere commodities, Stupid and salable. Wholly available, Ranged upon shelves; Each with his puny form In the same uniform, Cramped and disabled; We are not labelled, WE ARE OURSELVES. (Vagabondia.)

But even in the ecstasy of our freedom there creeps over us a feeling of sadness. It means

> Farewell to old Nebraska Hall, Uni. Hall and others; Farewell to the good old Faculty, Coeds, Friends, and Brothers.

We have had our "fling" and 'twas a good one, too. No one denies that except the Sophomores, and they don't know. The Freshmen aren't alive and the Juniors died long ago, so it leaves us, the Senior class, as a standing monument of the true worth and greatness



of our Alma Mater. We hope that our sojourn here may shine out as a beacon light to guide many an erring one to safety. Have we done anything to offend you? If so, we are justly sorry and beg your humble pardon. Have we done you a good turn? Then we are well repaid.

And in this our farewell hour we would voice our indebtedness to the faculty (they have been good sports right along), to our fellow students (who have not come to realize the true worth of that which they are about to lose), and to the nurses (God bless them, we love them all!), and to the janitors, who have always maintained that haughty disrespect when in our presence. We love them all and wish them all the rare good fortune (?) that awaits us.

The spirit of unrest pervades even our well regulated college. Anon the air tingles with nervous apprehension. Forgetting, for the moment, the excellent student spirit that rules in our college, a few faculty men began to foster grave fears that possibly THE PULSE might not live and thrive, as we all hope it will. A publication board or committee, which we never knew existed, so quietly and efficiently have they heretofore performed their duties, sprang into the limelight with a bulletin suggesting that the subscribers of THE PULSE elect two men to serve with the faculty committee. Not a word was said about the duties or limitation of power that the committee would have in regard to THE PULSE.

Then it became the students' turn to become alarmed. We remembered the sad demise of the old Omaha Medical College Pulse and mourned over the faculty-ridden rag. We wondered by what right the "subscribers of THE PULSE could elect men who might possibly be in a position to exercise a censorship over the paper and dictate its policy for some time to come. This would be not only manifestly unfair, but would be a blow against the life of the paper and against democracy in the school. I make this statement without qualification : The students of this school are capable of editing a paper that will ever be a credit to the college. We do not resent the kind offers of the faculty who tender us their assistance, and indeed we want the paper to truly represent the faculty, but it strikes us that the wise course to pursue would be to permit the students to edit a student paper in a way decided upon by themselves. Then the paper will be a better representative of the college, and the faculty able to maintain the dignity which they lose by showing their power when there is no need for a show of authority.

The Faculty of the Medical College is planning a very pleasant week-end for the students and visitors on the 22d and 23d of May. The visiting students from Lincoln will be entertained at the College building Friday forenoon, with lunch at Elmwood Park and outdoor games for the afternoon. Friday evening the general school reception will be tendered the Senior class at Jacobs Hall. Saturday forenoon the visitors will be entertained at clinics in the various hospitals in the city. It is thus that we are occasionally reminded that the faculty are really human and not the ogres that we ordinarily credit them with being.

Miss Mason is enjoying a very successful convalescence at home. She is probably right in her attitude that with the loss of her vermiform appendix there will be one thing less to worry about.

The Pre-Medic Society at Lincoln is a live organization, of which the officers are: William Dalzell, President; Kenneth Thompson, Vice President; Rudolph Johnson, Treasurer, and K. Davis, Secretary. A letter from the secretary tells of their activities. He writes as follows: "On Tuesday, May 19th, we will have a medics' convocation and on the following day will edit the Rag. On Thursday we will have our annual picnic with its usual ball games, swimming contests, etc., and terminating with a smoker in the evening. Friday of the same week we will arrive in Omaha to attend the clinics and Senior reception as you have planned for us."

The following plan is proposed by a member of the faculty for the conduct of The Pulse:

Article I. The Pulse shall be the official publication of the College of Medicine of the University of Nebraska, and shall represent the students, faculty and alumni.

Article II. The governing board of The Pulse shall consist of five members; three regularly registered students of the College of Medicine, one member of the faculty and one alumnus.

The faculty member shall be the chairman of the faculty committee on publications. The alumnus member shall be the president of the alumni association of the College of Medicine. The three student members (no two of whom shall be members of the same class or medical fraternity) shall be elected annually on the Friday before final examinations of each year.

Article III. The duties of the Pulse Board shall be to organize on the day following their election and to invite applications for positions on the Pulse staff. These applications shall be received at any time until the Friday of examination week in September, at which time the board shall meet and select from list of applicants the Pulse staff for the ensuing year.

It is understood that no student who is considered by the faculty to be delinquent in his work shall be eligible to a position on the Pulse staff.

* * *

Our only comment is that this appears to be another effort to frustrate democratic government in the school. A part of the faculty is apparently honest in their effort to secure a permanent student paper, but we feel that they are unduly agitated about the fraternity question. The members of medical fraternities are not children and they would shun the idea of either one monopolizing The Pulse, realizing that such a policy would ruin the future of the paper. As for choosing an editor in chief, he may or may not be a fraternity man. We predict that in the case democratic principles prevail, the most popular and best fitted man will be accorded the position, for we must remember that even though fraternity men do vote stubbornly for a brother, there are enough non-fraternity students to decide the matter fairly.

SENIOR NEWS

Our final examinations were over Wednesday, May 13th, and Beany says he is now through backing up and explains that he was just backing up to get a good start.

We were entertained at luncheon in the University Club rooms Thursday noon, May 14th, by Dr. Cutter, and to add to the jollity of the occasion the faculty held an informal meeting to pass on our fitness to graduate. At first there was some doubt on the part of Doctors Willard and Poynter, but they were well surrounded by members of the class and finally gave in.

Dr. J. E. Summers was greatly surprised to learn that Bill Scholten, who has lived on a farm, did not know what a curby horse was. He was informed that Bill lived on a farm when they drove oxen.

Thursday afternoon, May 14th, we were taken to Dr. B. B. Davis' country home in the new Stevens-Duryea. We were royally entertained by the doctor and Mrs. Davis. At lunch we were offered our choice of champagne or certified milk. (Needless to say we took milk!)

The faculty will tender the Seniors a reception on the 22d of May at Jacobs Hall.

The class will graduate with the Seniors of other colleges at Lincoln, June 11th.

The members of this year's Senior class have located as follows for next year: H. D. Burns, Clarkson Memorial Hospital, Omaha; E. B. Erskine, Nebraska Methodist, Omaha; J. H. Goodnough, Clarkson, externe and assistant to Dr. A. B. Somers; R. C. Gramlich, Swedish Immanuel, Omaha; Charles A. Harms, Nebraska Methodist, Omaha; D. D. King, Iowa Methodist, Des Moines; F. J. Kotlar, Iowa Methodist, Des Moines; C. F. Moon, Douglas County Hospital, Omaha; T. C. Moyer, Wise Memorial, Omaha; C. E. Pinckney, Immanuel Hospital, Omaha; William Scholten, summer school; Mrs. Williams, New England Hospital, Boston; B. A. Young, Nebraska Methodist, Omaha.

As a last sad word we wish to inform the world that we will be sweating through the state boards on the 27th and 28th of May. Have we your best wishes? We have. Thank you!

BRICKBATS AND BOUQUETS

Shorty Gray—That's the dope, come on with it! Say! All you fellows know is to raise (?). (Ask him what he thinks of the Juniors.)

Bull Moose—This is an extraordinarily unusual case (circumcision).

Perfect Lady—Of all long-horned cattle, this class is the worst. And the next fellow that says the tubes menstruate gets plucked. (Read page 26 in the doctor's text-book.)

Kimoner—You fellows don't get into the swing of this at all. (We understand the doctor says worse things about his present class.)

Pete—When he found Miss Magee's kitten in his plug hat (ask him).

Lillie-A good bunch. (Thanks awfully; we are not used to such remarks.)

Will Snortin-If any of you send me a case I'll wish that I had plucked you.

Cold Potato-Class, you can read as well as I can.

Bottle-I want she should have tincture of perchloride of iron.

Jimmie-He tells good stories.

Doc-If you fellows go to Mexico you'll carry soup.

Varnish-Balzam of Peeru is not wery goot stuff.

Adolph-Nobody loves a fat man.

Ike—You are expected to act like gentlemen. (Sorry, but we were raised in the wild and woolly West.)

Gus-When I used to practice in Wisconsin.

U.S.P. SQUIBS

The slapstick brigade—Cull, Bobby, Chuck and Gloomy—persistently attacks, and always from the rear, the enemy, Beany and Slewfoot.

Why does Pinck call up his wife every noon and ask her if he can eat his lunch?

Who will be Beany's next wife?

Three cheers for the Juniors! They are beginning to show signs of life. One (or more) of them stole the professor's book and then blamed it on the registrar. Keep it up, boys. Maybe by next year you will have sand enough to skip a class once or twice.

Recently we have noticed that Jack has kept awake for all his classes, when he was there.

Genevieve makes a mighty good Santa Claus.

Oh where! Oh where! has our breakage fee gone? Answer—It has gone to join Sage's towels.

JUNIOR NOTES

The following beats were perceptible after consultation with Mr. Veratrum Viride:

Nurse (putting a chair in the bath): "Seems a rummy thing to do, but Dr. Warner distinctly said that Mr. Dorsey was to have a sit bath."

Dr. Christie (to Dr. Alex Young): "My boy, if you forbid beer to your patients you will very soon be drinking water yourself."

Dr. Peterson (who had been gossiping for an hour): ``Well, well, I must be going. I've got to visit an old lady in a fit.''

Patient (desperately): "Oh! I wish I might die soon!"

Dr. Greenberg: "Do not be discouraged, my dear; I will do all I can."

Dr. Orvis (to the pleasant woman whose husband is sick): "I am hoping for the best; the crisis will soon be here now."

Pleasant Woman: "Shall I offer him a cup of coffee too? He will be chilled through and through with this bitter cold weather."

"Why does Dr. Robert Kerr call himself a specialist all of a sudden?"

"Probably because he has but 'one' patient."

Wilkie & Mitchell's Clerk: "Did that watermelon I sold you do for the whole family?

Customer: "Very nearly. Dr. Moser is calling yet."

"Do you think kissing is injurious, Dr. Barry?"

"Certainly, madam, if it results in marriage."

Dr. Keegan (to the wife): "Has your husband had a lucid interval since my last visit?"

"Yes, indeed; he had one this morning, when he said you were an idiot, and he obstinately refused to take the medicine."

Mr. Pinckney wants to know why Abe Greenherg always takes a raincoat when he goes on an Ob. case.

ODE TO A JUNIOR.

Man that is born of woman is of few days and full of microbes.

He cometh forth like a flower, but is soon wilted by the winds of adversity and scorched by the flames of perplexity.

Sorrow and headache follow him all the days of his life.

He hoppeth from his bed in the morning and his foot is pierced by the cruel tack of disappointment.

He sitteth himself down to rest at noonday, and is lacerated in his nether anatomy by the pin of disaster.

Behold he glideth down the banister of life and findeth it strewn with splinters of torture.

He is stung by the mosquitoes of annoyance by day and his frame is gnawed by the bedbugs of affliction by night.

Fate prevaileth ever against him.

What is man but a painful wart on the heel of time?

SOPHOMORE NOTES

We are sure that tall, handsome chap, rather young man, who bought the huge bunch of carnations from the pretty girl on the downtown street corner for the benefit of the Swedish Mission Hospital, who was mentioned in the editorials of the last issue of The Pulse, is not our charming friend by the name of William Lytle Ross, Jr., for we understand that his father has forbidden him LOADING down anybody's sick-room with flowers, and that he was obliged to cancel the last order he sent to the florist. That was sure hard on your ill friend, Bill!

During the materia medica examination of the Sophomores, held by the State Board in the Lincoln Hotel, one Creighton man was heard to ask another one what a "depilatory" was. The informer replied in an undertone that a depilatory was something to remove hair. But the questioner understood his benefactor to say that it was something to remove air, so he proceeded to tell on his paper that a depilatory was "something to remove gas from the stomach," scoring the hit of the season.

Dr. Schultz: "The practical examination in bacteriology will start this morning. You will draw your number and receive the unknown bugs of corresponding numerical value. These numbers run from 1 to 32, and because of any superstitious prejudice any of you might entertain, 13 and 23 have been left out."

FRESHMAN NOTES

The celebrated class skip-day was enjoyed in various ways. All but a few could be found at the Orpheum gazing on the stage, where there were special attractions. Farman, Davis and Bocken, who "piked out" on the rest, had to suffer the next day from a cold shower given them by the rest of the classmates. Since then there are no more "pikers" in class. Hurrah! Union forever!

Sorry to announce that "Gad" Farman will drop out of the ranks of the "unmarried" this summer, for his engagement has been found out. Wildhaber has also signified his intention, but the popular opinion is that he will still be with the "Singles."

REWARD: To the one who finds out the excuse Leonard had to go home last Friday.

Salisbury and Brix are pledged Tappa Kegga and will be initiated when their "capacity" has reached the T. K. standard.

Andrews, the motorcyclist, was "pinched" for speeding. If it had been Johnson or Higbee, no one would have thought anything of it, for they're our "speedy ones."

Why can't some of the upper classmen teach Talcott, Montgomery, Salisbury and Sigworth that Freshmen high school girls are too young to keep Sunday night dates with them, and besides their mothers object? So someone please interfere.

Physiological Chem. is over (i. e., with the majority of the class) and urine analysis is now in full sway. All are having just oodles of fun out of it.

These summer evenings just set the gang going so that they can't study, and one can never find any of them at home, for they're either out joyriding, or in some park with fair damsels. "Wait till the exams. come and then it's too late to think it over." (Socrates Salisbury.)

Nominations for next year's class president are now in order.

 $\mathbf{20}$

The writing up of a bunch of this sort Is a weighty task, but we'll do it in sport, And it "mocks notings" how hit, hard or light, You're all good scouts and there, all right!

We're launched on the vast sea of M-e-d And hope to do credit to the Uni. of N-e-b. That means us as the class of '14—no singles; Now for the lineup as you'll see on the shingles.

Charles Pinckney, A. B., M. D.

If I'm not in my office I'll be in the drug store.

That sounds very dignified, but do you recall, At clinic one morn, when he all had a fall, As the car specialist whirled him? I'll bet he can remember The details in full of that morn in December.

Torrence Moyer, A. B., M. D.

Night calls answered promptly. Gallstone Colic a Specialty. He's bean so faithful at the Wise, They all predict he'll quickly rise. His resuscitation of the Caesarean baby Makes the lungmotor's reputation shady, And from the care to Beany Jr. he has shown, There'll be some ''fetchin' up'' to a bunch of his own.

Charles Harms, B. S., A. M., M. D.

Obstetrics a Specialty.

In class a second Pluto, Naught beyond his reach, No athlete, mighty cute, tho', This fair and brilliant preach.

Mildred Williams, M. D.

The Lady Mildred, all alone, Displays the gift of much backbone. Cheer up! You one and only dame, Striving to win a doctor's fame. Here's wishing you wealth, But that's most a curse, As you're always kept busy A-hunting your purse.

D. A. D. King, M. D.

My photo will appear on my calendars.

In study he's earnest and "tackful," In his practice he'll be just the same, But he's already met the right damsel, And already changed her name. Big, tall, handsome, dark-haired Dad, That it can't be said of all of us sure is sad. 21

Charles Moon, M. D.

Eye, Ear, Nose and Throat. Office hours, 2 to 2:30 P.M. Often late for class and clinic, Maybe out of luck, Or rushed at the County; How about it. Chuck?

Jack Goodnough, M. D.

Fizishun and Sirgun. This husky works out with the Swedes,

But our good advice he never heeds. Such as: "Captain, sure your brain will soften

If you visit Council Bluffs so often."

Frank Kotlar, M. D.

No night calls taken. Office hours, 2 to 4 P.M. Said Findley to Gloomy in class one day, "How'd you give a Turkish bath?" And say! The answer was rich: "Well, I never had one, But then, I should judge, the first thing to be done''-

William Scholten, M. D.

G. U. Specialist. Office hours, 10 A. M. to 10 P. M. Young loug since, and as they say, He might have been all right in his younger day, But, as for respect, if gray hairs win it, Our leisurely Bill will be right in it.

Hiram Burns, M. D.

"Bring the patient in; my tires are flat." Good-natured, jolly old Bob! When things go wrong it most makes him sob. Some day a foine surgeon he'll make, and a "mash" With the aid of his famous "placebo" mustache.

Cull Erskine, M. D.

"Too busy now; will see you in my office tonight." Dr. Erskine, Pulse editor in chief, Wise as an owl, with always a scowl, Is going to the Methodist a year to take, To show Dr. Jonas his low grade's a fake.

Blaine A. Young, B. S., M. D.

Twenty per cent discount to those of Methodist faith. A tall and dignified personage he, Cut out for a good M. D.

Sober is "Deacon," and that pompadour does charm, But it hindered not his studying and caused no harm.

Ralph Gramlich, A. B., M. D. Wasserman's a specialty. Step in. Never out. The Chinese schoolboy, lunch box in arm, A little more frat. pep. would do him no harm. At the Immanuel he's the Interne, And right there at succeeding to learn.

22

ORGANOTHERAPY

(Prepared by E. B. Erskine for Dr. J. S. Goetz' Course in Therapeutics)

In organotherapy we recognize the latest addition to the physician's armamentarium. Although, at present, we have only two internal secretions, those of the thyroid and the suprarenal glands, which have given decisive therapeutic results and have been made official, the possibilities offered by the use of others promise fascinating results for the physician of today. With the placing of organotherapy on a scientific and rational basis the present generation of physicians will have added their bountiful offering to this most progressive era of medical advancement.

The existence of what is now spoken of as internal secretion was perhaps first experimentally demonstrated by Berthold's studies in 1849, when he attempted to produce malignancy by the transplantation of the cock's testis. The idea was given further impulse by Bernard's classical investigations on hepatic function showing the existence of a secretion interne (glycogen) and a secretion externe (bile). In the same year (1855) appeared Addison's immortal monograph attributing a definite clinical syndrome to disease of the supra renal capsules.

The relation of glands of internal secretion to disease being proven, Brown-Sequard's service (1869) in introducing organotherapy came in its natural sequence. The way was thus prepared for the concerted action of experimentalists, pathologists and elinicians, whose brilliant series of studies resulted in placing our knowledge of the disorders of the thyroid gland and their effective treatment on its present plane.

The influence of the various ductless glands on the physiological processes of the body is now well established, and in the case of the thyroid at least the therapeutic use of the substance of the gland is universally adopted in cases of myxoedema and cretinism, while good results are reported, from time to time, from the employment of other gland preparations. It is not yet clear to what extent the ductless glands form a correlated system, in which the products of one organ assist or balance those of another, but many observations point to the existence of some mutual influence. For example, in Graves' disease, the thymus is often found to be persistent and enlarged and if the suprarenal glands are removed in rabbits the pituitary body becomes hypertrophied. Hypertrophy of this gland may also be encountered after thyroidectomy, while in myxoedema along with atrophy of the thyroid gland the genital organs also waste. In acromegaly, which seems to be associated with over-action of the pituitary gland, the thyroid may be enlarged and the genital organs diminished in bulk.

The type of disturbance caused by excessive or defective action of the ductless glands is seen either in sexual changes, in developmental defects, in disturbances of nutrition, such as rickets and obesity, or in mental deficiency. Such disorders, therefore, afford the most likely ground for trial of the remedial efficacy of gland preparations.

For the sake of completeness, I shall consider those internal secre-

tions that are now regarded as specifics and later those which give promise of, some day, being as useful.

Osler says of the thyroid extract: "Our art has made no more brilliant advance than in the cure of these disorders due to disturbed function of the thyroid gland, namely Cretinism, Gull's disease and Cachexia Strumipriva. That we can today rescue children otherwise doomed to helpless idiocy is a triumph of experimental medicine for which we are indebted very largely to Victor Horsley and his assistant, Murray."

Many preparations of thyroid are now on the market, but it makes little difference how the gland is administered. The dried powdered extract and the glycerin extract are the most convenient. It is well to begin with the powdered gland, one grain three times a day. The dose may gradually be increased to 10 or 15 grains per day. In many cases there are no unpleasant symptoms; in others there are irritation of the skin, restlessness, rapid pulse and delirium, in rare instances tonic spasms, the condition to which the term thyroidism is applied. The results as a rule are unparalleled by anything in the whole range of curative measures. Within six weeks a feeble-minded, toad-like caricature of humanity may be restored to mental and bodily health. The treatment as Murray suggests must be carried out in two stages one early, in which full doses are given until a cure is effected; the other, the permanent use of small doses sufficient to preserve the normal metabolism.

It may be well in this connection to call attention to the serum treatment of hyperthyroidism. Mackenzie reports good results from the use of rodagen, or dethyroidized goat's serum, while Beebe has obtained remarkable results from the use of serum of animals into which human thyroid extract has been injected.

Adrenal Therapy. We have been disappointed in our expectation that the adrenal extract would prove a specific for Addison's disease as thyroid has in glandular deficiencies of that organ. E. W. Adams suggests that the reason for the poor results obtained in the majority of cases is that most cases of Addison's disease are due to a tubercular involvement of the supra renals and that the process is very extensive by the time that symptoms of the disease become apparent. In his analysis of 97 cases of Addison's disease he says that in 7 the condition grew worse, in 3 cases of transplantation death was attributed to the treatment; in 43 there was no effect noticed; in 31 there was temporary improvement; in 16 the relief seemed permanent.

The gland may be given raw or partially cooked or in glycerin extract. Tabloids of the dried extract are perhaps the most convenient preparation. Three of the tabloids are given daily, each one containing one grain of the dried extract or the equivalent of 15 grains of the whole gland substance. Operation has been suggested and carried out in one or two cases with such disastrous results that it has been abandoned for the present.

Aside from its specific use adrenaline is used in the form of adrenaline chloride 1:10,000 vel 1:1000 solution for superficial hemorrhages, local engorgments of the mucus membrane and for its action in causing contraction of the unstriped muscle tissue it is employed as a life-saving measure in cases of surgical shock. A favorite method of administration is the intravenous injection of normal salt solution (about 400 c. c.) to which has been added about 6 minims of the 1:1000 solution.

The following list of animal extracts is given in the list of New and Non-Official Remedies: Corpus luteum and ovarian substance, mammary gland substance, dessicated parathyroid gland, dessicated parotid gland, dessicated pituitary substance (consisting of the entire gland or the pars anterior or posterior), orchic substance, and dessicated thymus. These extracts will be considered separately and their present status defined.

Ovarian substance has been administered, often with apparently good results, for the relief of symptoms following the natural or artificial menopause and in dysmennorhoea and intermenstrual pain. The best results are obtained in cases of post-operative menopause, especially in young women. It is said to give good results in some cases of amenorrhoea with chlorosis.

It is generally recognized that one or more of the most important of the internal secretions of the ovaries originate in the corpora lutea and the latter have been tried recently to a considerable extent in some of the classes of cases in which the entire gland has been used. Thus it is stated that in cases of amenorrhoea or of scanty menstruation it markedly increases the menstrual flow and prevents nervous symptoms accompanying these conditions. Frankel states that the drug has no effect in dysmennorrhoea, irregular menstruation and the intoxication of pregnancy. Findley prefers the corpus luteum extract to the ovarian substance and has observed remarkable results from its use, e.g. the return of libido two years after a total hysterectomy. He also confirms its efficiency in relieving amenorrhoea, dysmenorrhoea, and intermenstrual pain, as well as the amelioration of the symptoms of the menopause. It is given in doses of 1 grain twice daily. The drug must still be considered to be in the experimental stage.

The extracts of the mammary gland are said to have an effect upon the uterus. They have been used in the treatment of profuse and painful menstruation and of uterine and ovarian tumors, but the beneficial results reported cannot be accepted until confirmed by further investigations.

The administration of parathyroid gland has proved of value in a number of cases of tetany following operative removal or injury of the parathyroid glands. It has prevented the attacks of tetany and seems undoubtedly at times to have prolonged life or actually saved life while the injured glands regained their function. It has proved of value in some cases of gastric tetany and of infantile tetany, although in many cases the results were negative. It has been recommended in paralysis agitans, eclampsia and chorea, but the reports as to its usefulness in these conditions are very contradictory. The gland is ordinarily given in doses of 1-10 grain of dessicated extract four times a day.

The dessicated Parotid gland is given in doses of 3 to 5 grs. t. i. d.

for the same reasons as suggested for the mammary and ovary; it has been recommended in artificial menopause, intermenstrual pain and various other conditions, but up to date nothing definitely valuable has been demonstrated from its use.

Little is known as to the function of the thymus, but it is believed to have an important relation to growth. There also seems to be some relation between the thymus and the thyroid, for the former is frequently abnormal in diseases involving the latter.

The dessicated thymus is employed empirically in the treatment of exophthalmic goiter, rickets, tuberculosis, haemophilia, and infantile marasmus, Still's disease and atrophy; its use in the latter conditions is said to be the most promising. The dose is 2 to 4 grs. t. i. d.

To the cells of Leydig in the testicle is attributed the secretion of orchic substance which is supposed to give to man his masculine characteristics. Absence of the testes has repeatedly given us males with feminine characteristics, whereas for example in the horse family, the full brother of a gelding has grown to be a magnificent specimen of the male type. But little work has been done with testicular extracts in the way of correcting feminism. Subcutaneous injections of testicular extracts were claimed to increase muscular energy from 10 to 20 per cent. Oxidation has been said to be somewhat increased, and extracts of the gland have been used in obesity. It has also been employed in prostatic hypertrophy and many other conditions, but the results have been most uncertain.

The application of the Brown-Sequard principle of organotherapy to the treatment of symptoms ascribed to the deficiencies of the pituitary body bids fair to rival the discovery of the efficiency of thyroid extracts in correcting glandular deficiencies. The special promise in pituitary extract rises from the fact that the pituitary body is considered as a governor for various other glands of internal secretion; that is to say, that the pituitary extract exerts a regulating influence on the other glands of internal secretion, all of which are interdependent. In order to prove this, special studies were made by Goetsch, who demonstrated the existence of alterations in the pancreatic islets and in the secreting cells adjoining them, a hypertrophy of the thyroid, persistence of the thymus, and a hypertrophy of the adrenal medulla, with fatty degeneration of the zona fasciculata in cases where the pituitary body was absent or deficient.

After hypophysectomy of all but the pars anterior, the ovaries and testes of puppies have been found to be of the infantile type with fatty degeneration of the cells of Leydig in the case of the testes, and a lack of development of the Graaffan follicles of the ovary. From the facts demonstrated, we are convinced that the poly glandular syndrome is the result of a disorder of the hypophysis.

The anterior lobe of the pituitary gland is essential to life, its total removal leads to death in a short time, and its partial removal or disease to a condition of retarded growth or infantilism, to obesity or other disturbances of nutrition. The hyperactivity of the anterior lobe (as in acromegaly) leads to accelerated and abnormal growth. These effects are proven to be due to an internal secretion. The posterior lobe and pars intermedia contain a substance which has marked constricting effect on plain muscle, especially that of the blood-vessels and the uterus. Extracts of the posterior lobe injected subcutaneously have been highly recommended in cases of uterine atony in post partum and other forms of uterine hemorrhage and in shock and other conditions of lowered blood pressure. It has been recommended in certain cases of pulmonary hemorrhage and intestinal paresis after abdominal operations.

A more important use for pituitary extract, however, lies in its use for ameliorating the manifestations of glandular deficiency. The symptoms of hypo-pituitarism, whether or not they are accompanied by neighborhood symptoms, or by evidences of pre-existent overactivity, are a tendency to subnormal temperature, dry skin, loss of hair, slow pulse, lowered blood pressure, asthenia, and an increased assimilation limit for carbohydrates often associated with a tendency to adiposity. Other less striking symptoms are constipation, polyuria, reversive sexual changes, and variable psychoses. Unquestionably these symptoms can be ameliorated by glandular administration in one form or another. In view of the fact that the malady is a polyglandular one, the administration of extracts of glands other than the one primarily involved may be of service.

Dr. Woodwark prepared tablets consisting of one grain each of thyroid, thymus, suprarenal and pituitary substance and made use of these in cases of myxoedema, of Mongolian idiocy, of obesity, and of rickets. Three patients suffering from myxoedema and one cretin all showed improvement, and three Mongolian imbeciles all improved mentally, becoming cleaner, quieter and more intelligent. Several cases of active rickets, one being associated with achrondroplasia, all seemed better after taking the tablets.

There can be little doubt, however, that the administration of extracts of the structure primarily at fault will give the best therapeutic results. For prolonged glandular feeding, dry powdered extracts secured by the passage of fresh gland through a Buchner press are the most convenient. In the present state of our knowledge dependence must be had for the most part on whole gland administration. We may, however, expect the time to come when the symptomatic manifestations of under-action of one or another portion of the gland will be sufficiently well recognized to justify the administration of extracts of that division alone.

As to the dosage: The rational dosage of the glandular extracts to be administered by mouth can possibly be determined by giving the individual, daily, an amount of glucose sufficient to produce a temporary mellituria in a normal individual of equal body weight; meanwhile an increasing amount of the extract is administered daily until under the conditions of increased carbohydrate tolerance which the patient exhibits, hyperglycemia occurs with a trace of sugar in the urine.

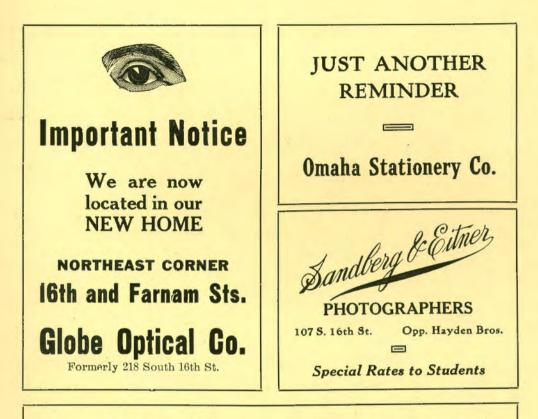
That the experimental administration of the extract has been followed in a few instances by marked improvement is shown by the recitation of a list of cases by Cushing. In case 10, he remarks that there was not only improvement in the general constitutional condition due to the glandular deficit, but under the combined surgical and organotherapeutic measures there was a return of libido et potentio sexualis after long abeyance. A particularly marked example of loss of weight under pituitary feeding is given by case 34, a boy with adiposo-genital dystrophy. Under the continued use of the extract not only did his weight diminish 18 pounds with loss of his former feminine outlines, but there was a complete physical and mental regeneration as well. Many such cases are reported by Cushing and other men, viz.: Axenfeld, Elschnig, Fleischer and Eason.

However, the therapeutic administration of extracts by mouth is fraught with many disappointments. Attention has been drawn to the fact that a prohibitive dosage of 300 grains per day was required in one case to give the subjective benefit which other patients with glandular insufficiency experienced with smaller amounts. In these cases recourse may be had to the hypodermatic injection of the extract or to glandular transplantation. To the latter method remarkable results have been ascribed and this method is of special value in that it serves to free the unfortunate patient from the bondage of a lifelong continuance of glandular administration. The method is to transplant a living gland to the brain cortex of the patient with the subsequent hypodermatic injection of the gland extract until such time as it becomes evident that the graft is taking and supplying the individual with sufficient normal secretion.

It will be seen from the foregoing that organotherapy is still in its infancy. But it offers a splendid opportunity for the clinician of today to add his portion to the progress of medical science.

JUST AMONG OURSELVES

Burns-Bobby, little fat boy. Erskine-Cull. Goodnough-Jack, Captain. Gramlich-Square, Dutch. Harms-Charley, Plato. King-Dad. Kotlar-Gloomy Gus. Moon-Loud Face, Bishop (he swears so artistically), Chuck. Moyer-Backup, Beany. Pinckney-Slewfoot. Scholten-Hurry up Bill, Hoch der Kaiser. Young-Deacon, Grouch. Williams-Willy, the Widow. Class Flower-Sponge. Class Motto-Never do anything today that can be done tomorrow. Class Sponsors-Lillian and Margaret. Class Song—Every Little Hinkle Has a Movement All Its Own. Class Pin-A Safety. Class Morals-We haven't any.



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