should be sought primarily, for medical readers must be very few who are not already convinced of the justness of this cause.

Three doubts, he says, are often suggested concerning the value of animal experimentation. The first relates to whether or no biological research really contributes to the success of medical art. The second concerns the question of justification for animal experimentation when it is not known that the results, although they may be scientifically sound, can have any effect whatever on the human being. The third doubt would question the justification of experiments which might interfere with the comfort, joy or life of animals. These are the queries which the intelligent layman, who has made some attempt to solve the problem for himself, is prone to ask. With rare logic, splendid illustrations and statistics so aptly chosen that they are startling even to him who follows medical literature carefully, the writer bowls over these quandaries one after another.

At the present time the best arguments of physicians in favor of the importance of their work are given to other practitioners to assimilate. There is no reason why the medical profession should be fed so constantly on predigested food. The great body of the general public, of which the profession is but a small part, are seeking eagerly such information. The people are deeply interested in medical research and its many conquests and are especially concerned with preventive medicine and its present applications. A recent article on hookworm disease in a popular magazine has set the world thinking. It is safe to say that the average Californian knows more about pellagra than he does of the prevalence of malaria in his own state. The whole superstructure of preventive medicine depends upon the education of the individual. Is it too much to say that the rights and privileges of animal experimentation rest upon the same basis?

TROPICAL MEDICINE.

It is not any longer necessary to emphasize before the medical profession of this state the special position of responsibility to the nation that California occupies in the matter of tropical medicine. The importance of the subject demands a recognition on the part of the whole profession of the Pacific Coast of the various so-called tropical diseases which are now present in, or may at any time invade our territory. With this fact in mind, we have asked Dr. Creighton Wellman, whose eminent qualifications and researches along these lines are well known, to prepare from time to time a critical summary of advances in knowledge in this direction as well as other matter relating to the incidence, etc., of tropical disease in this part of the country. Our idea is to make use of the JOURNAL as a clearing-house for subjects of interest in this field.

A cordial invitation is extended to all medical men to co-operate in making this department useful. Communications, abstracts, reviews, notes, comments, news items, etc., bearing on the general problem of tropical medicine may be directed to the Editor, Dr. Jones, or to Dr. Wellman in his care.

TROPICAL DISEASE IN OAKLAND.

With the object of gaining an idea of the amount of tropical disease in the city of Oakland, the writer has examined a number of patients in its hospitals, clinics and dispensaries, with the result that tertian, quartan and aestivo-autumnal malaria, leprosy, amoebic dysentery and liver abscess, bubonic plague, filariasis, flagellate diarrhoea and various intestinal parasites—including flukes (*Opisthorchis*), tape worms (*Dibothriocephalus, Taenia, Hymenolepis*), and round worms (*Ascaris, Oxyuris, Necator, Trichocephalus, Strongyloides*)—have all been seen. It is proposed to publish a fuller communication on this subject when the list is complete, but the existence of these and probably other tropical diseases is here recorded as being of interest and illustrative of the dangers of infection to which the inhabitants of the bay cities are constantly exposed.

CHOLERA IN RUSSIA.

The reports of thousands of deaths from the epidemic of Asiatic cholera now raging in European Russia furnish an instance of a "tropical" disease invading a temperate and arctic region. The situation begins to recall the great European epidemics of the last century, notably those of 1829, 1847 and 1869, all of which mulcted Russia severely. The older members of the profession will remember some of the epidemics which visited the United States in 1832, 1848-53, 1866 and 1873. We may congratulate ourselves that we have districts where cholera would probably be unable to propagate itself even if introduced, but we should not forget that we possess others where the conditions make quite possible such a calamity. The moral of the whole situation is that not only Russia but every other temperate country also needs to be constantly on guard against the importation of tropical diseases and watchful of any already introduced.

PELLAGRA.

Pellagra in the United States is a curious illustration of a disease long unrecognized but found to be common when once the general profession learned to diagnose it. The affection seems to be widespread, having been reported pretty much throughout the south, from New England and from the middle west. It should be carefully looked for on the Pacific Coast, as all information regarding its geographical distribution is at this time of the greatest value as having a possible bearing on the obscure aetiology of the disease. As it has been reported from such diverse regions as South Africa, the Soudan, Egypt, Turkey, Italy, Poland, India, Argentina, Brazil, Mexico, New Caledonia, the West Indies and the United States, importation of cases may always be expected in addition to those which originate at home.