greater skill the rather slender evidence of mortality data in the appraisal of nineteenth-century public health. The book is well documented. It is a great masterpiece of biographical writing.

FRASER BROCKINGTON

Richard Lower 'De Catarrhis', 1672, reproduced in facsimile and . . . translated, with a bibliographical analysis, by RICHARD HUNTER and IDA MACALPINE, London, Dawsons of Pall Mall, 1963, pp. xi [16], 29, 35*s*.

If a man correctly explained a natural phenomenon, are we justified in applauding him if he did so by using arguments and experiments which we now know to be mostly erroneous? If in addition he was not the first to make this discovery and must certainly have read the earlier work, one begins to wonder if he has made any contribution at all. This seems to be the case with Lower, whose essay on catarrh is here elegantly presented in facsimile and in translation.

The idea that the nasal passages connected directly with the intra-cranial cavity is to be found in the Hippocratic Writings* and it is elaborated by Galen, who also describes the excretion of cerebral phlegm (pituitary) into the naso-pharynx by way of the pituitary gland.† This theory was occasionally attacked in the seventeenth century. In his treatise *Catarrhi deliramenta* (Amsterdam, 1646, English translation by Walter Charlton, London) van Helmont denies the existence of catarrh, especially from the brain, as a disease concept. He does not go so far, however, as to refute the presence of the cranio-nasal and -pharyngeal channels nor the 'muccus' that flows through them from the brain. The first effective challenge which led to its overthrow came from Karl V. Schneider‡ in 1655 and in 1660–2 when his more important, yet very tedious work, *De catarrhis*, Wittebergae, appeared.§

Having decided to publish this very rare monograph it would perhaps have been more appropriate for the authors to have dealt in a little more detail with the earlier history of cerebral excretion so as to create a better background and perspective for it. One feels that the emphasis should have been placed upon the concept, which after all was one of the fundamental tenets of classical medicine and which lasted over 2,000 years, rather than on the bibliographical details which occupy about a quarter of the book.

EDWIN CLARKE

Preventive Medicine in World War II, vol. VI. Communicable Diseases: Malaria, prepared and published under the direction of Lt.-Gen. Leonard D. Heaton, Surgeon-General, U.S. Army. Editor in Chief, Col. John B. Coates, Jr., M.C., Washington, Office of the Surgeon-General, 1963, pp. xxv, 642, $6.25.

During the Second World War the most notable, practical advance in control of endemic disease was made in respect of malaria, numerically still the most important disease in the world. This volume of the United States Official Medical History shows how the infection was kept in check among the Allied troops, even in hyper-endemic areas, where it might have been a potent military deterrent and decided the issue between victory and defeat.

The optimum dosage of the drug 'Atebrin' was ascertained and its method of administration improved. It was manufactured in Britain in 1940 under the non-proprietary name of 'mepacrine', as was also another pre-war German drug,

* *On the Sacred Disease*, IX. † *The Use of the Parts*, VIII, vi.
‡ *Dissertatio de Osse Cribriforme*, Wittebergae.
§ See K. F. H. Marx, *Konrad Victor Schneider und die Katarrh*, Gottingen, 1873.