

ness on the right side. She was unsteady in her gait, stumbling to the right. No nystagmus. Strychnine and quinine improved the vertigo.

*MacLeod Yearsley.*

### THYROID GLAND.

**Burt, R. Shurley.**—**Manifestations of Thyroid Disease in the Upper Respiratory Tract.** "Laryngoscope," March, 1911, p. 145.

A large number of patients, the subject of thyroid disease, refer their first symptoms to the throat. The faucial tonsils appear to be in physiological and pathological relationship to the thyroid gland. It has been noted that thyroid enlargement has subsided after enucleation of the tonsils, and also that septic processes involving the lymphoid tissues, *i. e.* tonsillitis, quinsy or scarlet fever, are often direct ætiological factors in the occurrence of Graves's disease. It is therefore possible that tonsillectomy may have a place in the prophylaxis of Graves's disease. In cases of hypothyroidism, slowness and difficulty in articulation are often present. Slight motor insufficiency of the laryngeal muscles also occurs, but the affection of speech is not proportionate to this paresis. A perversion of taste is also often present. Two myxœdematous cases complained of tinnitus, but no lesion could be found on aural examination to account for this. In hyperthyroidism, or Graves's disease, taste, hearing and smell are less commonly affected. Cases of myxœdema sometimes present a peculiar infiltration of the nasal mucosa as an early sign, and later the membrane is found much thickened and the nose obstructed by a gelatinous yellow secretion. A cough with dry throat and husky voice may be the initial symptoms of Graves's disease, and cause the patient to first consult the laryngologist.

*John Wright.*

**Bahri, Ismet (Constantinople).**—**A Case of Acute Suppurative Thyroiditis after Influenza.** "Rev. Hebd. de Laryngol., d'Otol., et de Rhinol.," February 4, 1911.

A man, aged forty-two, who was just recovering from an attack of influenza, observed a swelling of the front of his neck, which became painful, gradually increased in size, and finally pointed. There was pain in deglutition and respiratory distress, owing to œdema of the aryepiglottic folds and ventricular bands. After evacuation the symptoms subsided, but the thyroid remained swollen. The pus contained streptococci.

*Chichele Nourse.*

### MISCELLANEOUS.

**Coakley, C. G. (New York).**—**The Association of Suppurative Disease of the Nasal Accessory Sinuses and Acute Otitis Media in Adults.** "Amer. Journ. Med. Sci.," February, 1911.

The subject is dealt with in two portions, namely, (1) statistics and (2) personal impressions. The former are based on a series of cases observed during a period of six months, consisting of sixteen cases of acute suppurative otitis media; twenty-six cases of acute rhinitis without sinus involvement; thirty-one cases of acute sinusitis (all of which also had acute rhinitis), and thirty-six cases of chronic sinusitis. Of the cases of acute otitis media 81 per cent. suffered also from sinus disease; of the cases of acute rhinitis 11.5 per cent. had acute suppurative otitis media; of the cases of acute sinusitis 42 per cent. had acute suppurative otitis