

**Frankenberger** (Prag).—*On Artificial Tracheal Stenoses.* "Allg. Wiener Med. Zeitung," 1895, Nos. 1, 3 and 5.

EXPERIMENTAL researches on animals.

*Michael.*

**Colley** (Marburg).—*Resection of the Trachea.* "Deutsche Zeitsch. für Chir.," Band 40, Heft 1 and 2.

RESECTION of the trachea was performed, in a case of stricture of the trachea in consequence of traumatism, with good results. The author then made experiments as to the best method of resection, and concluded that it would be best to cut the cartilages in bayonet form, so that the resected part should consist of the posterior halves of three cartilages and the anterior halves of three other cartilages. By this proceeding cicatricial stricture is prevented.

*Michael.*

**Ewald** (Wien).—*Tracheal Compression from Struma and its Consequences.* "Vierteljahrsschrift für Gerichtliche Medicin," 1894, Supplement.

A PAPER of the greatest interest. Many researches have shown that the thyroid gland is not separated from the trachea by a capsule, but that the hypertrophic colloid tissue of the thyroid gland always reached to the perichondrium of the trachea. This adhesion of the thyroid gland to the trachea is the principal cause of the compression of the trachea by struma. By this adhesion the vessels about the trachea, and those of the trachea itself, are also compressed, and, therefore, catarrh by stagnation may easily arise. Single tumours circumscribed by the same connective capsule as the trachea can only increase in this capsule, and produce, therefore, the different forms of compression observed in such cases. This hypothesis also explains why often great stenoses are caused by rather small tumours; the peculiarity of sudden death by goitre also can be understood by this adhesion.

*Michael.*

**Lautier.**—*Death occurring by Penetration into the Left Bronchus of a Tracheotomy Tube.* "Bull. Soc. Scientif. de l'Ouest," III., 4, p. 223.

A MAN, sixty years old, was tracheotomized fifteen years previously for laryngeal stenosis. For many years the patient used bad tubes without pinion, and one day the tube slipped through the tracheal opening and occluded the respiratory tract. Unsuccessful attempts were made at extraction, and death resulted from asphyxia. At the *post-mortem* examination the tube was found fixed in the left bronchus.

*A. Cartaz.*

## THYROID GLAND, NECK, &c.

**Kocher** (Bern).—*The Function of the Thyroid Gland with relation to the New Methods of Treatment of the diverse Forms of Goitre.* "Correspl. für Schweizer Aerzte," 1895, No. 1.

IN twelve cases the author has used thyroid gland extract in cases of goitre. In five cases observed in the hospital and in five out-patient cases a definite influence of the treatment could be observed; the goitres decreased in a high degree, but in no case disappeared. Nearly the same effect is obtained by the well-known iodine treatment. The experience of many years shows that nearly ninety per cent. of all cases can be improved by the use of iodine; only in ten per cent. does surgical treatment become necessary. The author, therefore, does not believe that the new treatment will have any great practical value in the treatment of goitre. Of much greater value is feeding with thyroid gland for treatment of cachexia strumi-

priva and myxœdema. The fact that the same treatment can decrease the hypertrophied gland and improve the consequences of the absence of the gland leads to the consideration that goitre is also a consequence of diminution or deterioration of the normal secretion of the thyroid gland. This is also probable from the fact that cretinism is observed combined with hypertrophy and in other cases with atrophy of the thyroid gland. As to this theory, it is necessary to review another disease in its relation to the thyroid gland—viz., Basedow's (Graves') disease. This is probably a complex of symptoms produced by hyper-activity of the thyroid gland. The symptoms are in all points contrary to those of myxœdema and cachexia strumipriva. Here feeding with thyroid gland would deteriorate the general condition. Trachewsky has found that by the use of phosphate of soda the symptoms of Graves' disease can be improved. By extirpation of the gland or by atrophy from ligature of the arteries the symptoms of Graves' disease are also improved. The same result sometimes is obtained by the use of iodine. Excision of the gland and the so-called exothyropexy (luxation of the gland in cases of compression of the trachea) sometimes produce symptoms similar to Basedow's disease. This effect is observed in sudden but transient inundation of the body with secretion of the gland irritated by the operative proceeding. The influence of water on goitre must be explained in this manner: the water contains a toxic material; the thyroid gland absorbs the material and increases, but as soon as its compensatory power is exhausted the symptoms of cretinism arise. *Michael.*

**Kocher** (Bern).—*Notes to the Paper on the Functions of the Thyroid Gland.* See the last number of the "Schweizer Correspl.," 1895, No. 1.

HISTOLOGICAL description of one of the extirpated goitres. *Michael.*

**Anderson.**—*Contribution to the Knowledge of the Morphology of the Thyroid Gland.* "Archiv für Anat. und Physiol. (Anat. Abtheilung)," 1894, Heft 3 and 4.

CAREFUL examinations by the author gave the result that the conditions of rest and activity of the thyroid gland differ from one another by characteristic changes in the epithelium of the gland and of the contents of the follicles. Details must be seen in the original. *Michael.*

**Jeanselme, E.**—*Infectious Thyroiditis and Strumitis.* "Gaz. des Hôp.," Feb. 2, 1895.

CRITICAL review of recent works on this subject. The author believes infection to be the only origin of thyroiditis. The infectious germ is variable, and may result from bacteriological products of typhoid fever, erysipelas, puerperal fever, etc. This disease, more frequent in women than in men, has been observed as a complication or sequel of every infectious disease. According to the infectiousness of the primary disease, the inflammation is more or less serious, and has more or less proclivity to suppuration, abscess, or gangrene. The author reviews the principal symptoms of thyroiditis at the different stages of the inflammation, and describes the forms—latent, suppurative, with abscess, and with or without accidents of compression of the trachea, dissecting, and gangrenous. It is an excellent general review. *A. Cartaz.*

**Lund** (Manchester).—*Cyst of Thyroid.* "Brit. Med. Journ.," Jan. 5, 1895.

THIS was a case in a girl, aged eleven, of cyst of the thyroid, complicated with laryngeal paralysis. Dysphagia and dyspnoea existed. The voice became affected from abductor paralysis of the left vocal cord. After removal of the cyst the voice was improved, but there was no alteration in the condition of the cord. *W. Robertson.*

**Erselberg** (Utrecht).—*Disturbances of Development in Animals following Early Extirpation of the Thyroid Gland.* "Langenbeck's Archiv," Band 49, Heft 1.

THE author has extirpated the strumous gland in young animals, and found that the consequence was disturbance of development, so that the animals operated upon remained very small. The damage was much greater in herbivora than in carnivora. Sometimes also there arose other disturbances, such as idiocy, tetanus, a marasmus similar to senile marasmus, myxœdematous degeneration of the connective tissue, decrease of temperature and atrophy of the genital organs.

*Michael.*

**Launz** (Bern).—*Treatment of Goitre with Thyroid Gland.* "Correspl. für Schweizer Aerzte," 1895, No. 2.

RECOMMENDATION of this treatment.

*Michael.*

**Roberts, J.**—*Thyroidectomy in the Treatment of Goitre.* "Amer. Lancet," Feb., 1895.

THE period of three months is given as ample time for the exhibition of drugs, when, failing improvement, operation becomes advisable. Pressure on the trachea causing dyspnoea and on the recurrent causing hoarseness are suggested by the author as indicating early operation. Operation in exophthalmic goitre is not approved of. The paper concludes with the description of operations on two cases.

*R. Lake.*

**Von Gernet** (Dorpat).—*Casuistics of Enucleation of Goitre by Socin's Method.* "Deutsche Zeit. für Chir.," Band 39, Heft 5 and 6.

REPORT of thirteen cases all operated upon with best results. The details are only of surgical interest.

*Michael.*

**Von Gernet** (Dorpat).—*Contribution to the Treatment of Myxœdema.* "Deutsche Zeitsch. für Chir.," Band 39, Heft 5 and 6.

A PATIENT, forty years old, for six years had all the symptoms of myxœdema, and had been treated without any effect by many methods. Implantation of the thyroid gland of a sheep under the pectoral muscle was therefore performed. For some months all symptoms of myxœdema disappeared. The patient then had profuse diarrhoea. Subsequently all signs of improvement disappeared, and the former condition recurred. The patient left the hospital uncured. Treatment by feeding with thyroid gland was then begun with the best results; all symptoms have disappeared, and the patient is quite well. In four months she has used 108 grammes of thyroid gland; she takes twice a week 1·85 gramme. When she takes more, signs arise of intoxication, such as noises in the ears and palpitation. She has a craving for thyroid gland if she does not get it, but only if any symptoms of myxœdema arise does she require to take her maximal dose of nearly two grammes. At other times she only requires the fourth or fifth part. The author believes that longer treatment with feeding and injections will have deleterious effects in patients, and hopes that implantation will have good results in cases which become normal by the method of feeding. In cases of myxœdema the gland is absorbed in a short time.

*Michael.*

**Mendel** (Berlin).—*Three Cured Cases of Myxœdema.* "Deutsche Med. Woch.," 1895, No. 7.

1. A PATIENT, fifty-eight years old, had since eleven years of age the symptoms of myxœdema in a high degree. Application of thyroid tablets resulted in cure, but the patient is obliged to take tabloids from time to time.

2. A lady, forty-six years old, had for two years swelling of the eyelids, palpitation, loss of hair, and, later, swelling of the whole skin. Injections of thyroid substance were without effect. Cure was obtained by the use of tabloids. She now uses tabloids from time to time.

3. A patient, forty years old, with all the symptoms of myxœdema, was improved by injections of thyroid substance, but was cured in a short time by the internal use of thyroid tablets. *Michael.*

**Palleske** (Neustadt).—*Cure of Myxœdema following Operation by Feeding with the Thyroid Gland of the Sheep.* "Deutsche Med. Woch.," 1895, No. 7.

THE patient, twenty-seven years old, acquired myxœdema by operation upon a goitre three and a half years before. Since that time all the symptoms of myxœdema developed. Cure was obtained by the internal use of thyroid gland. *Michael.*

**Buschan** (Stettin).—*Criticism of the Modern Theories of the Pathogenesis of Basedow's Disease.* "Wiener Med. Woch.," 1894, No. 52; 1895, No. 1.

REVIEW.

*Michael.*

**Hitschman** (Wien).—*Contribution to the Casuistics of Basedow's (Graves') Disease.* "Wiener Klin. Woch.," 1894, Nos. 49 and 50.

REPORT of some cases without special interest.

*Michael.*

**Lemke** (Hamburg).—*Diagnosis and Treatment of Basedow's (Graves') Disease.* "Deutsche Med. Woch.," 1894, No. 51.

THE author concludes that a patient is affected with Basedow's disease if there is delirium cordis and vibratory tremor. The other symptoms (exophthalmos and goitre) are consecutive, and only confirm the diagnosis. The cause of Basedow's disease is probably a pathological chemical change in the secretion of the thyroid gland. *Michael.*

**Schaffer.**—*Critical Remarks upon some New Papers on the Thymus Gland.* "Internat. Monats. für Anat. und Physiol.," 1894, No. 3.

THE critical remarks prove that the so-called asthma thymicum does not exist, and that sudden death from sudden swelling of the thymus gland never occurs.

*Michael.*

**Hildebrand** (Göttingen).—*Congenital Epithelial Cysts and Fistulas of the Neck.* "Langenbeck's Archiv," Band 49, Heft 1.

REPORT of thirty cases observed in the clinic of Göttingen. Must be seen in the original. *Michael.*

## E A R S.

**Bezold, F.** (Münich).—*Investigations concerning the Average Hearing Power of the Aged.* "Arch. of Otol.," Vol. XXIII., No. 3.

A LARGE number of people above fifty, classed according to the decades fifty to sixty, sixty to seventy, seventy and upwards, were examined by means of whispered voice and otoscopy in all cases; the tuning-fork in some. From the curve formed on a chart it could be seen that in each of these decades there is not only a successive decrease in the number of those with nearly normal hearing, but also a