

of this nature. The method consists essentially in a further extension of the radical operation which he employs for chronic empyema of the antrum. Exposure of the canine fossa is effected by an incision through the mucous membrane and periosteum at the reflection from the cheek to the gum, and this is followed by a somewhat extensive removal of the facial wall of the antrum. The entire mesial wall is then taken away, and free access is thus obtained to the ethmoid cells and the sphenoidal sinus. After removal of the growth the oral wound is closed and subsequent treatment is conducted through the nose.

The first of the two cases was one of malignant endothelioma. The growth was extensive and had produced prominence of the whole left cheek with a fluctuating swelling beneath the inner canthus of the left eye. The hard palate was bulged downwards, and the entire left nasal cavity was filled with growth. At the operation the tumour was found to have arisen from the middle ethmoid cells and to have caused very extensive destruction. A small portion of the dura mater of the anterior fossa, immediately in front of the optic chiasma, was exposed. Recovery was rapid and complete, and no recurrence had taken place seven months after the operation. The microscopic appearances of the growth were those of an endothelioma.

The second case was one of medullary carcinoma. The tumour filled the whole of the right nasal cavity. The facial wall of the antrum was reduced to the thinness of paper and a part of the mesial wall had been destroyed, as had also the bony and a portion of the cartilaginous septum. The growth arose from the posterior ethmoidal region. During the removal of the tumour masses from the roof of the nasal cavity the dura mater of the anterior fossa was torn to an extent of 1 cm. The disease seemed to have been completely extirpated, but death from meningitis took place thirty-six hours after the operation.

The author compares his operation with those which involve skin incisions. He claims that with his method the risk of aspiration pneumonia is diminished and all disfigurement is avoided. The method has also been successfully employed by Professor Manasse, of Strassburg, in two cases of endothelioma.

Thomas Guthrie.

NASO-PHARYNX.

Morse, J. L.—*Diseases of the Naso-pharynx in Infancy.* "Boston Med. and Surg. Journ.," April 18, 1907.

The author's experience leads him to believe that these maladies and the frequency of their occurrence are not appreciated by the general practitioner, that they are often entirely overlooked or improperly treated. The anatomy of the region is shortly recapitulated, and the following conditions are then discussed: acute rhinitis, diphtheritic rhinitis, adenoids, pharyngitis, retro-pharyngeal abscess, and otitis media. The paper is one for general practitioners rather than specialists, and the advice it contains is sound.

Macleod Yearsley.

ACCESSORY SINUSES.

Vernieuwe (Ghent).—*A Contribution to the Study of Closed Ethmoidal Sinusitis.* "La Presse Oto-laryngologique Belge," June, 1907.

The author's observations are based upon the records of two cases. In the first the accumulation of pus in the ethmoidal cells was accom-