

## NOSE AND NASO-PHARYNX.

**Goodhart, F.** (London).—*Common Neuroses*. "Brit. Med. Journ.," Dec. 12, 1891. Harveian Soc., Nov. 26, 1891.

UNDER this heading the author first dealt with paroxysmal sneezing, regarding which he remarked that, occurring as it did in the neurotic, it was not probable that any good result could accrue from severe local measures. Angina clericorum could, in the experience of the author, be efficiently treated by a mere "good tonic, and an honest assurance that there was nothing serious the matter." "Cold catching" and asthma were to be treated on the same lines—by tonics and assurances. [Treatment on the author's "lines" will, we fear, seem somewhat antiquated to our readers.—*Abstractor*.] *Hunter Mackenzie*.

**Trevelyan** (Leeds).—*Sebaceous Adenoma of Nose*. "Brit. Med. Journ.," Dec. 19, 1891. Leeds, &c., Med. Chir. Soc., Dec. 4, 1891.

EXHIBITION of microscopical sections. *Hunter Mackenzie*

**Bronner, A.** (Bradford).—*Atrophic Rhinitis*. "Brit. Med. Journ.," Dec. 26, 1891. Bradford Med. Chir. Soc., Dec. 15, 1891.

EXHIBITION of cases of the fœtid and non-fœtid variety.

*Hunter Mackenzie*.

**Wagner** (Halle).—*Rhinolith*. "Münchener Med. Woch.," 1891, No. 47.

THE author removed a rhinolith from a patient thirteen years old, the first symptoms of which, consisting of fœtid rhinitis, had begun when the patient was in the second year. After removing the stone there was a cubical hole on the lateral side of the nose, caused by the increasing size of the stone having made an impression on the upper jaw. The fœtid rhinitis ceased after the removal, but recurred a short time later, but has now been cured by insufflation of boric acid. *Michael*.

**Liewen** (Würzburg).—*Etiology of Rhinitis Fibrinosa*. "Münchener Med. Woch.," 1891, Nos. 48 and 49.

BY cauterizing the nose of a man with trichloroacetic acid, the author produced a wound which he infected with staphylococcus, and so produced an artificial rhinitis fibrinosa.

[I must remark that it is to my mind most improper to perform such experiments upon man, and to produce infectious diseases of the human body, especially as the results are of very slight interest.] *Michael*.

**Scheinmann**.—*Rhinitis Fibrinosa*. Verein für Innere Medizin in Berlin. Meeting, Nov. 16, 1891.

SCHEINMANN showed the membranes of rhinitis fibrinosa. He has found no bacteria.

LEYDEN also found no bacteria in such membranes.

HENOCH says that it is easy to discover Loeffler's bacteria in membranes. Such cases as those demonstrated are cases of prolonged diphtheria, in which very chronic membranes are produced. *Michael.*

**Hessler** (Halle).—*Affections of the Ear following Simple Operations in the Nose.* "Münchener Med. Woch.," 1891, No. 50.

IN nine cases of operations upon the nose, such as galvano-cauterization of the turbinateds and operations upon the deviated septum, the author saw subsequent inflammations of the ears, and therefore warns us to operate in the nose only where the indications are well marked.

*Michael.*

**Wagner** (Halle).—*Diseases of the Brain following Simple Nasal Operations.* "Münchener Med. Woch.," 1891, No. 51.

IN a patient twenty years of age, on account of headache, the author performed a galvano-cauterization of the left turbinated. There was no special pain, and no bleeding followed. The next day the patient had severe headache. The third day suddenly arose bleeding from both nasal cavities. Treatment with ice-water. Some hours later renewed hæmorrhage; anterior tamponade of the nose, also of the posterior with Bellocq's tube on account of the continuance of the bleeding. In the evening the patient became feverish, Cheynes Stokes respiratory phenomena arose, the tampon was removed, but the temperature did not decrease and all symptoms of severe disease of the brain arose. Seven days later death occurred. No *post-mortem* examination. The author concludes the bleeding cannot be the direct consequence of the operation, because firstly it followed some days later than the operation, and secondly because parts which had not been operated on were bleeding. He believes that it was the consequence of a sinus thrombosis by which the circulation in the nose was disturbed. Also in some other published cases operations had been followed by meningal diseases after treatment of the middle turbinated.

*Michael.*

*Discussion on the Papers of Hessler and Wagner: Complications in Brain and Ear following Nasal Operations.* Verein der Aerzte in Halle-a-S., Meeting, Nov. 4, 1891. (See *ante*.)

SCHARFE believed that an antiseptic after-treatment should always follow the nasal operations. He also prefers galvano-caustic puncture to chiselling, believing that the latter gives more occasion to the entrance of sepsis. For tamponing he would apply iodoform gauze, and the tampon should not remain longer than twelve hours.

BRAMANN believed that a distinction must be made between essential epistaxis and bleedings following necrotic processes. For such processes a short tamponing will suffice; but for epistaxis the tampons must remain some days, otherwise the bleeding will recur. If performed in a proper manner, the tamponing is without any danger.

OBERST believed that the bleeding is caused by the solution of the eschar. When the bleeding began the temperature was already higher than normal, through the septic infection.

F. KRAUSE also believed that tamponing of the nose by an aseptic

medium, such as iodoform gauze, is not at all dangerous. He had only seen in one case erysipelas following its use, but this was cured. In the greatest surgical operations this manner of tamponing is also applied without any damage.

BRAMANN also believed that the tamponing was applied at a time when sepsis was already present. *Michael.*

**Clarke, J. Jackson** (London).—*Dilatation of Sphenoidal Sinus.* "Brit. Med. Journ.," Dec. 12, 1891. Path. Soc. of London, Dec. 1, 1891.

THE specimen was taken from a boy, aged thirteen years. The sphenoidal bone contained a very large sinus; in this was a small myxomatous polyp. Two or three months before death he had had a fracture of the frontal bone, and latterly he experienced attacks of epistaxis, during one of which he died. The sphenoidal sinus was full of clotted blood, and communicated directly with an opening in the left carotid artery, which had probably been caused at the time of the accident. Dr. Spicer had been able to find one case only (Zuckerkandl) of myxomatous polyp of the sphenoidal sinus. *Hunter Mackenzie.*

**Solly** (London).—*Occlusion of the Posterior Nares by a Septum.* "Brit. Med. Journ.," Dec. 5, 1891. Clin. Soc. of London, Nov. 27, 1891.

EXHIBITION of a girl, aged sixteen, in whom this abnormality was apparently of congenital origin. It was perforated, and the opening kept patent. *Hunter Mackenzie.*

**MacBride, P.** (Edinburgh).—*Case of Epithelioma confined to the Naso-Pharynx.* "Brit. Med. Journ.," Dec. 19, 1891.

A CLINICAL report of a case.

*Hunter Mackenzie.*

**Wroblewski.**—*Contribution to the Question of Post-Nasal Growths—Adenoid Vegetations in the Deaf and Dumb.* "Przegląd Lekarski," Nos. 23 and 24, 1891.

AFTER some remarks, regarding the pathology and treatment of post-nasal growths, the author presents the results of examination of the naso-pharynx in 160 cases of deaf and dumb. He found in 92 cases post-nasal growths in a smaller or greater degree, *i.e.*, 57, 5 per cent. That is a much greater percentage than with other children (Kafemann, 7, 8 per cent.). The author distinguishes (by posterior rhinoscopy) the following 5 forms: (1) growths filling up naso-pharynx under the form of an amorphous mass (10 cases); (2) hanging growths (23 cases); (3) nodulous (13 cases) on the basis of the cranium and on the lateral wall; (4) verrucous (6 cases); (5) mostly smooth growths (50 cases). With the deaf and dumb the last-named growths are frequent (23). Enlarged tonsils we meet oftener in the deaf and dumb (56, 5 per cent.) than in other children (Kafemann, 22, 4 per cent.). The author advises operation on these growths as soon as possible. *J. Sedziak.*

**Ball, J. B.** (London).—*Remarks on Cases of Adenoid Vegetations.* "Practitioner," Jan., 1892.

AN analysis of 150 cases, presenting the ordinary features in the usual order of frequency. Only three were over twenty years of age. The

tonsils were enlarged in a large proportion of cases. In sixteen cases among other symptoms were noticed "nocturnal suffocative attacks," from the tongue dropping back against the palate. Restlessness at night was observed in twenty-five cases. Headache was common, aprosexia not observed. Dr. Ball is not in favour of posterior rhinoscopy as being difficult and, in children, not unfrequently impossible. He relies on palpation, and considers a gag unnecessary, as when "once the finger is back in the pharynx, the child strains and gags and does not bite" [*Credat Judæus Apella non ego*]. He discountenances expectant treatment, and operates under chloroform, with Woakes's forceps, followed by the use of the finger-nail. Nitrous oxide gas allows too short a time. [The abstractor would like to recommend a more trustful use of the posterior rhinoscopic mirror as quite practicable in a large number of cases, and certainly a humane substitute for palpation in diagnosis; also the use of one of the approved forms of finger-guard. He would also press for the use of the finger-nail *previous* to that of the forceps, as the operation conducted in this manner is more rapidly performed and quite practicable during nitrous oxide anæsthesia.]

*Dundas Grant.*

**Marsh** (Birmingham).—*Adenoid Hypertrophy in the Naso-Pharynx.* "Birmingham Med. Rev.," Nov. 1891.

THERE is nothing especially new in this paper; it treats of the symptoms and results of this common disease, and quotes some others who have written on it. The author treats it by finger-nail, Walsham's modification of Loewenberg's forceps, and the curette in children. In adults the galvano-cautery is preferable.

*B. J. Baron.*

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## MOUTH, TONGUE, PHARYNX, &c.

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**Schmolka.**—*Syalolith in the Ductus Whartonianus.* "Prager Med. Woch.," 1891, No. 52.

THE stone removed by incision from a patient fifty years old had an ovoid form, was 32 mm. long, 16 mm. broad, and had a weight of 5½ gramm. Only one case is published of a syaloid stone larger than that of the author. It had a weight of 9·17 gramm.

*Michael.*

**Siegel** (Britz).—*Stomatitis Epidemica in Men, and its Identity with the "Maul und Klauenseuche" of Domestic Animals, and the Microbes of both Diseases.* "Deutsche Med. Woch.," 1891, No. 79.

IN the little city of Britz, near Berlin, where the author had the greatest portion of the practice, he observed, in the year 1888-89, an up to now unknown epidemic disease in man. It must be remarked that in this city were kept many black cattle. The disease had the following symptoms: incubation eight to ten days: after this time began with shivering, universal indisposition, vertigo, epileptic spasms, vomiting, pains in the