

only number 10. Strictures dilated gradually, and patient taught to pass œsophageal tube herself; the tracheotomy tube will be required permanently.

J. S. Fraser.

Berry, Gordon.—**Sarcoma of the Tonsil.** "Boston Med. and Surg. Journ.," vol. clxvi, p. 276.

The patient was a woman, aged eighty-five years and eleven months, with a lympho-sarcoma of the right tonsil and a nodular mass under the sterno-mastoid. The latter was dissected away and the external carotid ligatured. The tonsil tumour was removed through the mouth by dissection and a cold wire snare. Recovery was rapid and uneventful and no recurrence had taken place two months later. The neck began to be brawny three weeks later. A discussion of the literature is given.

Macleod Yearsley.

ŒSOPHAGUS.

Myers, H. L.—**Report on Three Cases of Removal of Coins from the Œsophagus of Infants by a Simple Procedure.** "Annals of Otol., Rhinol., and Laryngol.," vol. xx, p. 460.

The simple procedure was the passage of an olive-pointed, flexible bougie beyond the coin, followed by traction when the olive end engaged the lower edge of the coin.

Macleod Yearsley.

Yankauer, Sidney.—**Four Cases of Foreign Body in the Œsophagus removed with the aid of the Œsophagoscope.** "Annals of Otolaryngology and Laryngology," vol. xx, p. 414.

Case 1, child, aged three; penny just above sternal notch, removed with ease. *Case 2*, child, aged fourteen months; small, irregular leaden toy at level of sternal notch, easily removed. *Case 3*, boy, aged two and a half; penny just below cricoid, easily removed. Previous attempts, by forceps introduced blindly, failed owing to seizure of the mucous membrane instead of the penny. *Case 4*, boy, aged four; piece of brass just above sternal notch. Truncated cone, smaller end very sharp. Extensive wound of posterior œsophageal wall at level of cricoid leading into fistulous track behind œsophagus. Foreign body removed with difficulty owing to torn œsophagus. Patient died next day.

Macleod Yearsley.

MISCELLANEOUS.

Caldera, C. (Turin).—**Researches on Bacteræmia in Oto-rhino-laryngiatry.** "Archiv. Ital. distologia," January, 1912, p. 1.

The author, considering the demonstrated presence of bacteria in the blood in many diseases without the occurrence of grave septicæmia, has endeavoured to ascertain in what diseases of the throat and ear bacteræmia may take place.

It is well known that the tonsil is the gate of entrance for many grave blood diseases resulting, for instance, in endocarditis of which fatal cases have followed various forms of angina. Recent cases of Prof. C. Fedell¹ and of Prof. Egedi² are quoted. In three of these a fatal termination

¹ "Boletino mal. Orrecchio," February, 1911.

² *Ibid.*, October, 1910.