conditions mentioned above. Such signs have given me the clue to appropriate treatment.

The effects upon the nose of chronic intestinal toxæmia also merit more attention than has been accorded to them. Many of the cases of varying turbinal hyperæmia (with or without accompanying septal abnormalities) clear up with remarkable rapidity when the toxæmia is treated. They are really instances of disturbed vasomotor conditions, and are often subjected to the tragedy of galvano-cauterisation.

August 21, 1916.

I am, Sir, yours faithfully,

MACLEOD YEARSLEY.

NOTES AND QUERIES.

PULMONARY SUPPURATION AFTER TONSILLECTOMY.

In the Interstate Medical Journal Dr. H. Wessler has published a skiagraphic study of the pulmonary inflammation due to aspiration, which sometimes follows tonsillectomy. He applies the term "lung suppuration" as more accurate than abscess or gangrene of the lung, which describe only a possible phase of the process. At the Mount Sinai Hospital, New York, he has examined with the $\mathbf{\hat{X}}$ rays eight cases of pulmonary suppuration following tonsillectomy. These formed as high a percentage as 28 of all the cases of pulmonary suppuration observed in the same period. In all a general anæsthetic had been administereda procedure which stands in close relation to the complication. After an incuba-tion period of a few days symptoms of broncho-pneumonia begin. Later, evidence of suppuration—chills, high fever, and purulent expectoration—supervenes. In practically all the cases the sputum was foul at some time or other. This is some justification for the designation of gangrene of the lung, but the latter is a subordinate lesion. The putrefactive organisms usually cause small areas of gangrene, and as these are sloughed out the sputum becomes factid. Periods of grangrenous sputum alternate irregularly with others in which there is no distinctive odour. Hæmoptysis is a very constant symptom, and varies from a slight brownish discolouration of the sputum to the expectoration of a pint of blood. Pain is frequent, and due to associated pleurisy. A predilection for the right lung was noted (six of the eight cases), and any lobe may be affected. The physical signs are frequently not distinctive, and are of the least value in diagnosis. As a rule, an area of dulness of varying extent is demonstrable with but few changes in the respiratory sounds, which are frequently diminished. In not one case were there signs of a cavity. There is evidently consolidated and poorly acrated lung, some-times covered by thickened pleura. In six of the cases spontaneous recovery took place in from six weeks to five months. In one case recovery took place after two years—following excision of carnified lung. The remaining case is still unimproved. Skiagrams show an infiltration of the lung of varying extent. In five cases a cavity was demonstrated, in some with a fluid level which shifted on a change of position of the patient. The shape of the infiltrated area varied; in some a lobar distribution was seen; others gave the impression of a residual infiltration involving only, the small portion of a lobe. Unless the lower lobe is involved there is no restriction of the movement of the diaphragm. When present, cavities are easily recornised as lighter areas of circular or elliptical shape within the an area of dulness of varying extent is demonstrable with but few changes in the are easily recognised as lighter areas of circular or elliptical shape within the shadow of infiltrated lung. In two cases they were multiple, and in two located at the hilus. When filled with secretion they may be invisible, but come into view after copious expectoration. The process of cure may be followed by the Roentgen rays. The infiltration gradually becomes less dense and fades at the provide use it discussors because for this burden for some periphery until it disappears, leaving perhaps a few thickened strands for some time. But clinical cure may be associated with persistence of the infiltration. Whether in such cases recrudescence follows cannot be said.

BOOK RECEIVED.

Throat and Ear Troubles. By Macleod Yearsley, F.R.C.S. With 12 Illustrations. London: Methuen & Co., Ltd. Price 1s. net.

ADVERTISEMENTS.

Lancet.-"We have nothing but praise for this Annual."

34th Year. About 1,000 pages. **10**/- net. Enriched with many Illustrations and Plates, in Colour and Black and White.

THE

MEDICAL ANNUAL, 1916.

A DICTIONARY OF MATERIA MEDICA & THERAPEUTICS, and a DICTIONARY OF NEW TREATMENT. With Special Sections for NAVAL and MILITARY SURGERY, including Wound Infections; RADIO-ACTIVITY and ELECTRO - THERAPEUTICS; PUBLIC HEALTH, including Forensic Medicine, Hygiene, Industrial Diseases and Toxicology, and School Medical Service; INCOME TAX in Relation to the Medical Profession, etc.

Contributors :

E. WYLLVS ANDREWS, A.M., M.D., Chicago. JOSEPH G. BLUMFELD, B.A., M.D. FRANCIS D. BOVD, C.M.G., M.D., F.R.C.F. FRANCIS J. CHARTERIS, M.D., B.C.H. JOHN D. COMRIE, M.A., M.D. LEWIS A. CONNER, PH.B., M.D., New York. CAREY F. COOMBS, M.D., M.R.C.F. JOHN S. FRASER, M.B., CH.B., F.R.C.S. HERBERT FRENCH, M.A., M.D., F.R.C.F. BRYDEN GLENDINING, M.S., M.B. F.R.C.S. EDWARD W. GOODALL, M.D., B.S. OSKAR C. GRUNER, M.D. Lond. C. THURSTAN HOLLAND, M.R.C.S., L.R.C.F. J. RAMSAY HUNT. M.D., New York. ROBERT HUTCHISON, M.D., F.R.C.P. A. CONVERS INMAN, M.A., M.B., B.C.H. FREDERICK LANGMEAD, M.D., F.R.C.P. E. G. GRAHAM LITTLE, M.D., F.R.C.P. CHARLES FRED. MARSHALL, M.D., F.R.C.S. BEDFORD PIERCE, M.D., F.R.C.P. JOSEPH PRIESTLEV, B.A., M.D., D.P.H. SIR LEONARD ROGERS, Lt.-Col. I.M.S., M.D., F.R.C.S., Calcutta. JAMES SEARSON, M.D. A. HUGH THOMPSON, M.A., M.D. J. W. THOMSON WALKER, F.R.C.S. W. IRELAND DE COURCY WHEELER. B.A., M.D.

k. A. GASCOIGNE WILDEY, Dep. Surg.-Gen., R.N. ERNEST JEFFERIS (Income Tax).

Journal of State Medicine .- " No medical man can afford to do without this Annual."

Glasgow Medical Journal.—"The amount of information contained in the volume is almost incredible, and nothing of the nature of new discovery has been omitted."

Journal of the Royal Naval Medical Service.—"The work *is invaluable* to those wishing to keep pace with modern theory and practice, and should be carefully read."

New York Medical Journal.—" The general practitioner may well feel grateful for this work, even if he has been a fairly diligent reader of the medical periodicals."

BRISTOL, ENG.: JOHN WRIGHT & SONS LTD. LONDON: SIMPKIN, MARSHALL, HAMILTON, KENT & CO. LTD.

ADVERTISEMENTS.

Dr. Irwin Moore's UNIVERSAL FORCEPS

For Removing Foreign Bodies from the Esophagus, Trachea, or Bronchi,

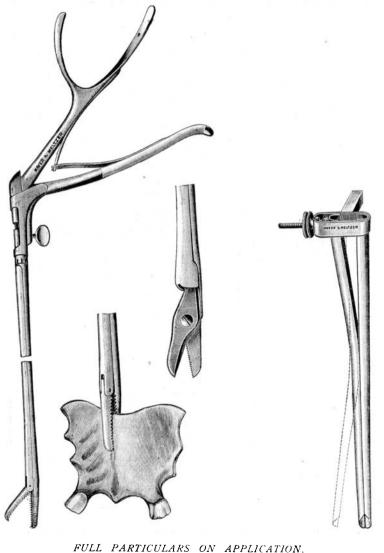
And ENDOSCOPIC CUTTING FORCEPS or SHEARS

For Cutting through Tooth-plates, Pins, or Bones.

Dr. William Hill's EXPANDING ŒSOPHAGOSCOPE

For assisting in Removal of Impacted Tooth-plates, etc.

See LANCET, May 13th, 1916.



MAYER & MELTZER, 71, GT. PORTLAND ST., LONDON, W.

And

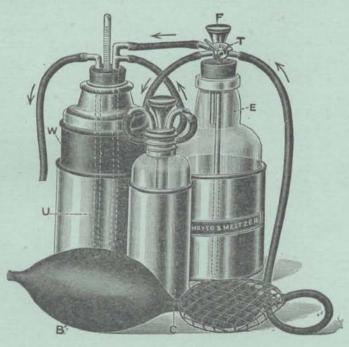
ADVERTISEMENTS.

MAYER & MELTZER,

Surgical Instrument Makers. ESTABLISHED OVER FIFTY YEARS.

Regulating Apparatus for the Administration of Warm Anæsthetic Vapours.

(Vide article in LANCET, Jan. 8th, 1916, by FRANCIS E. SHIPWAY, M.A., M.D.Cantab.)



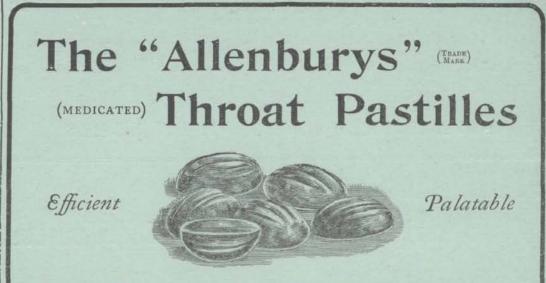
The Administration of Warm Ether Vapour has all the advantages of the Open Ether Method, and is safer. There is less loss of body heat, less shock, less consumption of the anæsthetic.

Price £3 15 0

If with Chloroform Attachment £4 17 6

MAYER & MELTZER, 71, GREAT PORTLAND ST., LONDON.

Contractors to the War Office.



The basis of the "Allenburys" Throat Pastilles is a special pâte de jujube. The pastilles are demulcent, soluble and palatable, and contain accurate amounts of pure active drugs. They dissolve slowly and uniformly, so ensuring the thorough suffusion of the mucous membrane, and the prolonged continuous direct effect of the active ingredients.

The following pastilles are largely used, and have been found from long practical experience to be very efficacious.

No. 9. Menthol, Cocaine and Red Gum Menthol, gr. 1/20th ; Cocaine, gr. 1/20th ; Red Gum, gr. 2 No. 23. Eucalyptus and Red Gum Eucalyptus, & minim of the Oil ; Red Gum, gr. 1 No. 28. Compound Guaiacum Gualacum, gr. 1; Chlorate of Potash, gr. 2; Red Gum, gr. 2 No. 29. Compound Rhatany Extract of Rhatany, gr. 2; Cocaine Hydrochlor., gr. 1/20th No. 38. Chlorate of Potash, Borax and Cocaine Chlorate of Potash, gr. 2; Borax, gr. 1; Cocajne, gr. 1/20th No. 75. Formaldehyde and Menthol Formaldehyde, min. 1; Menthol, gr. 1/40th No. 77. Formaldehyde and Cinnamon Oil Formaldehyde, min. 1; Ol. Cinnamon, min. 1/2 1/- box of any variety, with detailed list, free to Medical Men in Great Britain. IMPORTANT.-To ensure the supply of these active and reliable medicinal products, medical men should designate the "ALLENBURYS" Pastilles in their prescriptions.



PRINTED BY ADLARD AND SON AND WEST NEWMAN, LONDON AND DORKING.