Two patients had died. In another case there was no return of the dysphagia, but the patient died later of cerebral tuberculosis. In two cases the subsequent events were not known, but in one of them when last seen healing was almost complete.

The operation is not a very painful one, although when there is much infiltration the effect of the cocaine is only partial. Alexander's guillotine

is an ideal instrument for the purpose.

The writer regards the operation as a very valuable one, and gives the following indications for it:

(1) Tuberculous disease completely or almost completely limited to the epiglottis, when the general condition is good enough to allow of this comparatively slight operation.

(2) Marked dysphagia, without reference to the condition of the larynx and lungs if the dysphagia is probably caused by the epiglottic

disease.

(3) Advanced tuberculosis of the epiglottis in cases of more extensive laryngeal tuberculosis, even when there is no dysphagia, provided that lung disease is absent, or so slight that healing or considerable improvement may be expected.

Thomas Guthrie.

EAR.

Moy, M.—Otitis in Varicella. "Thèses de Lyon," 1906-7, No. 53.

In 875 cases of varicella Semtschenko noted otitis in 17. This complication, which is most likely to occur in children with large tonsils and adenoids, is due to the bucco-pharyngeal inflammation spreading to the middle ear viil the Eustachian tube as in other infectious diseases. The aural manifestations of varicella are: (1) Acute otitis media, due primarily to varicella; grave complications may arise, e.g. mastoiditis, meningitis, cerebral and cerebellar abscess, and thrombosis of the lateral sinus; (2) recrudescence of old otitis; (3) otitis externa, usually benign, but sometimes followed by mastoiditis and even meningo-encephalitis. Prophylaxis should consist in careful daily ear and throat examination, and in a rigorous bucco-pharyngeal antisepsis.

Macleod Yearsley.

Ferreri, Prof. (Rome).—Labyrinthine Vertigo Caused by Irritation of the Vagus. "Atti della Clinica oto-rino-laryngoiatrica, del Prof. Ferreri di Roma," Anno v, 1907.

He relates ten histories with many sphygmograms, by which he shows that in persons who suffer from cerebral vertigo the pulse becomes manifestly slow on compression of the *vagus* at the right part (cardarelli). In the others, which were classical aural cases, the line of the pulse in the same conditions of examination did not present any alteration.

V. Grazzi.

De Carli.—A Case of Aural Diphtheria. "Atti della Clinica oto-rinolaryngoiatrica, del Prof. Ferreri di Roma," Anno v, 1907.

This is the case of a person, about thirty years of age, in whom the *otitis media* was the only manifestation of the diphtheria.

The bacteriological examination gave an almost pure culture of the bacillus. Recovery with Behring's serum (9000 units). The otitic process, which had begun violently, ended in nine days.

V. Grazzi.