

Preindlsberger describes a case operated on by himself. There was a crater-like ulceration of the right tonsil, with considerable infiltration; the glands in the submaxillary and carotid fossæ were enlarged, soft, and movable.

The main point in the operation was that good access was got to the diseased parts by removing the greater part of the angle of the jaw after loosening the attachment of the masseter. The wound healed well and the patient was soon able to take ordinary food.

This modification enables one to do a satisfactory operation in cases where the oral method would be insufficient, and the more extensive bone operation uncalled for.

An interesting work on the above subject is that by Housell (*Beiträge zur Klinischen Chirurgie*, Band xiv.) A. Westerman.

PHARYNX.

Molinie (Marseilles).—*Obliteration of the Pharyngeal Opening of the Eustachian Tube, etc.* "Rev. Hebdom.," December 17, 1904.

Two cases of an interesting affection are described by the writer. It consists of the formation of a membrane on the lateral wall of the nasopharynx, which covers the Eustachian orifice and narrows the opening of the cavity into the pharynx. It is not of a cicatricial nature as the result of ulceration, and the tissues remain with their normal mucous lining and are quite elastic. Both patients had been subjected to very many applications of the electric cautery in previous years, but the writer is quite satisfied that this had nothing to do with the present condition. The symptoms resulting from these anatomical changes are: slight obstruction to nasal respiration, some difficulty with olfaction, deafness and tinnitus in the ear of the corresponding side, nasal intonation.

The treatment consists in constant dilatation with a bougie. After a little experience the patient can learn to pass the instrument himself, and must keep it up. Surgical attempts at removal of the membrane are useless, as the membrane always re-forms. Albert A. Gray.

NOSE AND ACCESSORY SINUSES.

Liaras and Bordet.—*Treatment of Ozena by High Frequency Currents.* "Rev. Hebdom.," November 26, 1904.

After referring to the work of Bordier and Collet, who gave encouraging hopes in the treatment of ozena by the method under discussion, the present writers give the results of their investigations. In all, they tried the method upon ten typical cases. In three of these the patients only appeared at three *séances*, as the treatment was too painful. Of the remaining seven the results were in some cases *nil*; and in a few there was a little improvement so far as the symptoms were concerned. Thus, the foul smell was diminished considerably in one or two, and a little improved in others. The crusts were loosened and did not re-form so rapidly, and the green colour was not so apparent. The same fact was noticed in the naso-pharynx. The writers, however, found no change in the mucous lining of the nose or other parts.

The treatment is distinctly disagreeable and indeed, in not a few cases,

was even painful. Immediately after the application of the current there is an increase of the flow of mucus with a consequent softening of the crusts.

In the writers' opinion, this method is distinctly inferior to that by means of massage, and to the other methods already in vogue.

Albert A. Gray.

Brindel (Bordeaux).—*Preliminary Note on the Treatment of Spasmodic Coryza by Interstitial Injections of Paraffin.* "Rev. Hebdom.," December 10, 1904.

After referring to the uncertain results of the ordinary methods of treatment the writer states the reasons which led him to try the effect of injections of hard paraffin into the mucous tissue of the nose. He employs a wax of a melting point of 60° cent., and injects it in the usual way into the mucous membrane over the turbinated body. A small nodule forms round the paraffin, and according to the statement of the author a sclerosing process results, which along with the mechanical effect of the wax prevents the engorgement of the tissue which is the exciting cause of the symptoms.

The method of treatment has been applied in five or six cases, and a cure is claimed in all. Should, therefore, other investigators confirm these results a most important advance will have been made in rhinology.

Albert A. Gray.

Kretschmann (Magdeburg).—*Contribution to the Operation for Empyema of the Antrum of Highmore.* "Münch. med. Woch.," January 3, 1905.

Kretschmann recommends carrying the ordinary incision as far forward as the middle line, so that the mucous membrane of the inferior meatus of the nose may be detached from the bone, and the skeleton of the outer wall of the inferior meatus laid bare; a very large opening is then made in the canine fossa, extending further forward than usual, leaving, however, the margin of the pyriform aperture intact. The mucous membrane of the lower part of the inner wall of the antrum is detached, and the bone is removed from front to back. He uses this detached mucous membrane for the purpose of helping to line the cavity. An extremely large opening is therefore left, and everything in the way of a ridge between the floor of the nose and the floor of the antrum is removed.

Dundas Grant.

LARYNX.

Elterich, T. J. (Pittsburg).—*Papillomata of the Larynx in an Infant.* "Archives of Pediatrics," November, 1904.

The child was a male, aged two years. Symptoms began at seven months, consisting of hoarseness and dyspnoea. Complete aphonia developed early and persisted up to the time of his death. Anti-syphilitic treatment was attended by marked improvement in general condition and in the respiration. A severe attack of varicella was attended with extensive bronchitis and dyspnoea. The child died before tracheotomy or intubation could be performed. The larynx was found to be almost entirely occluded by a mass of papillomatous growth.

Macleod Yearsley.