

INSTRUMENTS, THERAPEUTICS, DIPHTHERIA.

Kuhn.—*New and Modified Forceps for Operations upon the Pharyngeal Tonsil.*
“Naturwissenschaftlich Medicinischer Verein in Strassburg, Nov. 8, 1889.
Michael.

Noltenius.—*Contra-Laryngoscope (Gegenspiegel) Removable from the Reflector for Demonstration of the Larynx, Naso-Pharynx, Nose, Ear, and for Auto-Laryngoscopy.*

SLIGHT modification of Bose's auto-laryngoscope. *Michael.*

Cagney (London).—*The Administration of Certain Drugs by Electricity*
“Brit. Med. Jour.,” Nov. 16, 1889. Harveian Society of London, Nov. 16, 1889.

THIS method is stated by the author to be best adapted for the treatment of diseases of the skin and mucous membrane, or of small tumours immediately beneath them, more especially those which indicated the use of iodine and iodide of potassium. It was stated to have proved very useful in syphilitic and other affections of the throat, and more particularly in chronic pharyngitis, in nodes and gummata in accessible situations, and in tubercular ulcers. It promoted absorption in enlarged strumous glands, and might be expected to prove of benefit in bronchocele and exophthalmic goitre.

In the application of the method, a very strong current was not necessary, but a sufficient current density was required, and the tissue under treatment must be brought directly in the path of the current. The electrodes might be either sponges holding solution of iodide of potassium or a modification of Dubois' conducting tubes filled with the fluid; by this means, the drug, which was not easily tolerated by every constitution, was conveyed directly to the part where its action was needed, and presumably in a condition of maximum activity.

The author gives the following instructions for the treatment of mucous surfaces: “The electrode might be made of a glass tube, which
“could be filled with fluid, having a zinc wire introduced through the
“bottom and the mouth, which might be cut to any desired curve)
“blocked with a fine sponge. This was connected by means of the zinc
“wire with one pole of a galvanic battery. The electrodes should be of
“large surface area. The fluid should be a saturated solution of iodide
“of potassium, and it ought to be supplied, where possible, at both
“poles. Where this was not possible, the solution should be at the
“negative pole. The current should be passed from ten to fifteen
“minutes, and its strength would be determined by circumstances. Its
“direction should be reversed every minute. Under suitable conditions,
“the positive pole might be carried by a gold needle, which was plunged

“in a convenient situation beneath the skin. This expedient served especially in the treatment of strumous glands, and perhaps of bronchocele.”

The PRESIDENT (Dr. Buzzard) stated that he would take an early opportunity of testing this new method. *Hunter Mackenzie.*

Lange, Victor (Copenhagen).—*A Rare Case of Idiosyncrasy towards Tannin used for External Application.* “Hospitalstidende,” Jan. 29, 1890.

A CLERGYMAN, suffering from chronic pharyngitis and rhinitis, was painted in the pharynx with a solution of tannin (1·15). Immediately after, profuse watery secretion from the nose, and considerable œdema of the soft palate and uvula set in. Shortly after an exanthema of urticaria developed, with general symptoms of *malaise*. The second day the patient was all right. The author had seen the same thing happen twice before on the application of tannin. *Holger Mygind.*

Ossendowsky, Alexandr J. (St. Petersburg).—*A Contribution to the Menthol Treatment of Pulmonary and Laryngeal Tuberculosis.* “Vratch,” No. 3, 1890, p. 62.

FOLLOWING the suggestion by Professors D. J. Koshlakoff and N. P. Simanovsky, the author has undertaken clinical experiments on the menthol treatment in twelve cases of pulmonary, and in fifteen of laryngeal phthisis. In pulmonary phthisis, the drug was administered internally [℞—Mentholi ʒj; gummi arabici, sacchari albi lina ʒss. Mf. pil. No. 60. D. S. To take five pills a day, gradually increasing to 20, 30, and 40], and simultaneously in the shape of inhalations (from ten to twelve times a day, from Schreiber's or Simanovsky's apparatuses, or from an ordinary two-necked bottle). In laryngeal cases, paintings were made in addition (by means of Heryng's swab, with a from ten to fifty per cent. oily solution, once daily, or every other day, or twice a week, according to local reaction). The principal results obtained by the writer may be summarised thus:—

I. *Pulmonary Tuberculosis.*—1. As a rule (in eight out of twelve cases) the menthol course is followed by a considerable amelioration in the patient's general condition.

2. In the majority of cases, the remedy improves appetite, promotes easy expectoration, and gradually decreases the daily quantity of the sputa.

3. It never gives rise to any renal irritation.

4. Neither does it ever induce hæmoptysis.

II. *Laryngeal Tuberculosis.*—1. Menthol undoubtedly possesses a considerable analgesic action, the patient feeling a very marked relief for some while after each local application.

2. The paintings decrease local inflammatory phenomena, and disperse infiltrations.

3. They promote healing of superficial ulcers; they are, however, powerless to bring about cicatrisation of deep ulcerations.

4. Strong solutions (40 and 50 per cent.) sometimes may cause local irritation. Hence it is advisable to always begin with a 10 per cent. solution, and to increase the strength but more or less gradually.

5. To be successful, the local treatment must be always associated with a general one.

III. *The Influence of Menthol on the Stomach.* (Experiments on two phthisical patients and one healthy man.)—The remedy increases a general acidity of the gastric juice (which is usually lowered in phthisis), as well as the absorptive and motor power of the stomach.

Valerius Idelson.

Hope, S. Wilson (Petworth, Sussex).—*Treatment of a Common Cold.* “Brit. Med. Jour.,” Nov. 9, 1889.

THE author recommends 20 grains of salicylic acid in liquor ammoniæ acetatis three or four times daily. Another writer recommends the local application of salicylic acid to the nose.

Hunter Mackenzie.

Ehrmann.—*Application and Effect of Trichloroacetic Acid in Diseases of Nose and Pharynx.* “Münch. Med. Woch.,” 1890, No. 9.

THE author has applied the medicament as a caustic in 170 cases with good results. In a diluted state he has also applied it combined with iodglycerine as astringent medication, and is satisfied with his results.

Michael.

Lœffler.—*The Present State of the Question of the Etiology of Diphtheria.* “Deutsch Med. Woch.,” Nos. 5 and 6, 1890.

THE author remarks that many other observers agree with him that the bacillus described by him in 1884 is the real micro-organism of this disease. Nobody doubts that the disease is a well characterised infectious disorder. In all cases of certain diagnosis, *intra vitam*, the author has found this bacillus. He then refers to the observations of other authors concerning this micro-organism. Not all authors believe yet that this bacillus is pathognomonic, because bacilli of similar aspect are also found in the oral cavity of diphtheritics which are not virulent, and because in the oral cavity of healthy children, and in cases of simple angina, bacilli are found similar in aspect and in virulence to this bacillus. It, therefore, will be necessary to continue the study of these different micro-organisms. He then refers to the paper of Wood and Formad (82)—experiments which have not yet been conducted according to modern methods of bacteriology; to that of Prudden (89), who has never found the Lœffler bacillus, but in twelve cases out of forty a streptococcus, which he views as pathognomonic. The author has often also found streptococci, but regards them not as pathognomonic, but as able to produce diseases similar to diphtheria. Inoculated upon animals, especially upon guinea-pigs, the bacillus produces great necroses of the skin, and, if the animals survive, paralysis of the extremities supervenes. At *post-mortem* examination inflammation of the lungs and the kidneys are also found. He then reports upon the effect of the extracts of the pure cultures. Their effect is toxic, but different authors describe it differently. On the intact mucous membrane of animals the bacillus does not produce similar effects, and probably not in man also. The author concludes with some statistical remarks.

Michael.

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Virchow.—*Diphtheria in Berlin.* “Berliner Med. Gesellsch.,” March 12, 1890.

THE author showed tables dealing with the propagation of diphtheria in Berlin in the years 1883 to 1888. Every year the number of cases has diminished (from 8628 to 4108). Fatal cases have diminished from 2655 to 1018.

Michael.

Brunner.—*Treatment of Croup and Diphtheria.* “St. Petersburg Med. Woch.,” 1890, No. 6.

THE author recommends local antiseptic brushing and gargling, applications of steam, warm baths, and diaphoresis.

Michael.

Roos (Finland).—*The Treatment of Diphtheria with Creolin.* “Finska L. Handl.,” March, 1889, p. 262.

THE author recommends a two per cent. solution of creolin as a gargle in cases of diphtheria.

Holger Mygind.

Hallager, Fr. (Denmark).—*Diphtheritic Paralysis.* “Hospitalltidende,” Jan. 22, 1890.

THE author reports a case of a man, aged twenty-two, who, after a severe attack of diphtheria, had paralysis of the velum and accommodation. A month after anæsthesia of the toes began to develop, later on accompanied by pareses, first of the inferior, and then of the superior extremities. Dr. H. stated that anæsthesia existed on the first examination upon the left underarm up to the elbow, and on the right underarm to a little above the middle, and on both thighs to a little above the middle. There was also loss of patellar reflex, while the skin reflexes were normal. The anæsthesia disappeared by degrees, the upper edge moving gradually downwards. The symptoms described point distinctly to an affection of the medulla by the diphtheritic poison.

Holger Mygind.

Meierovitch, Fedor M. (Kovno).—*Tracheotomy in Croup and Diphtheria.* Proc. of the Kovno Med. Soc. for 1889, p. 34.

DURING 1886-7 the author performed 25 tracheotomies with 16 (64 per cent.) recoveries, and 9 (36 per cent.) deaths. Of 11 cases (all boys) operated upon for croup, 9 (81·8 per cent.) recovered, 2 (18·2 per cent.) died. Of 14 cases (8 boys, 6 girls) operated upon for diphtheria, 7 (50 per cent.) recovered; 7 (50 per cent.) died. Of 9 private patients operated upon under bad hygienic conditions, 5 recovered; 4 (44·5 per cent.) died; of 8 well-to-do patients, 5 recovered, 3 (37·5 per cent.) died; of 8 hospital patients, 6 recovered, 2 (25 per cent.) died. As regards the age, the results were as follows:—

1 to 2 years,	3 cases;	0 recoveries,	3 deaths.
2 ” 3 ”	3 ”	2 ”	1 ”
3 ” 4 ”	6 ”	5 ”	1 ”
4 ” 5 ”	7 ”	3 ”	4 ”
5 ” 7 ”	6 ”	6 ”	0 ”
	25	16	9

Of 25 cases, in 3, high tracheotomy, in 4, middle, and in 18, lower, were performed. The lower operation is generally preferred by the author, its

advantages being : (1) The trachea may be exposed more freely ; (2) it is opened at a considerable distance from the larynx (which is especially important in diphtheria) ; and (3) granular vegetations develop by far less frequently than in the case of high operation. In simple cases the author removes the cannula on the sixth or eight day after the operation, replacing it with a fenestrated tube ; the latter is removed as soon as the patient becomes able to breathe freely, with its external opening closed for 24—48 hours. Of complications, the following were observed : (1) In 2 cases the diphtheritic process spread to the wound on the second day ; (2) in 1 croupous case profuse tracheal hæmorrhage occurred on the eighth day in consequence of decubitus caused by the cannula ; (3) in 1 case the cannula could not be removed until 14 months after the operation, in consequence of granular vegetations above the wound, necessitating ultimately galvano-cauterisation. All the 4 patients recovered.

Valerius Idelson.

MOUTH, TONGUE, PHARYNX, ŒSOPHAGUS, &c.

Barker.—*Macroglossia.* “Brit. Med. Jour.,” Apr. 5, 1890. Path. Soc.

THE author described in detail the condition of a tongue, the greater part of which he had removed from a young child some years ago with complete relief. The diagnosis had been lymphangioma cavernosum, and blue colouring matter was in readiness for injection of the lymph spaces immediately after operation. The tongue presented generally a lumpy papillated surface, the eminences on its surface having almost a translucent appearance, probably due to the presence of the distended lymph spaces underneath the papillary layer. These spaces were found to be quite irregular in shape and distribution in relation to the various components of the tongue. They penetrated everywhere except actually into the epithelial covering of the organ. The muscle bundles were to a certain extent separated by them, and by more or less exudation or lymphoid tissue. In most cases long branched lymphatic vessels extended up between the papillæ. The muscle fibres appeared normal in size, but slightly irregular in arrangement, owing to the new tissue between them. The condition was congenital, but had been greatly exaggerated by acute and sub-acute attacks of glossitis from time to time. There had been no recurrence since operation, and the shape of the tongue was excellent. An examination of the specimen simply confirmed the views expressed by the author of the paper in his article on the *Disease of the Tongue*, in Holmes' “System of Surgery,” viz., that macroglossia is, in the majority of cases, due to lymphangiectasis alone, with but little change in the other structures of the organ.

R. Norris Wolfenden.

Hutchinson, J., Jun.—*Lymphatic Nævus of Tongue.* “Brit. Med. Jour.,” April 5, 1890. Path. Soc.

THE author exhibited sections illustrating lymphatic nævus of the tongue