

pharyngoscope in intranasal diagnosis. Rhinologists have been curiously slow in making use of this instrument, an indispensable aid in the diagnosis of disease in the posterior regions of the nose.

Dan McKenzie.

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### NOTES AND QUERIES.

COL. A. D. SHARP., C.M.G.

We are pleased to observe that Col. A. D. Sharp, Surgeon to the Ear, Nose, and Throat Department, Leeds Public Dispensary, who has been in France since the beginning of the war, has been awarded the honour of C.M.G.

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#### EPISTAXIS.

"I regard epistaxis in middle-aged and elderly people as very suggestive of high tension. It is a symptom which requires careful investigation, and it may be the first intimation of a condition of the vascular system leading to a cerebral hæmorrhage."—Dr. de Havilland Hall, *Medical Press and Circular*, March 14, 1917.

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#### TONSILLITIS AND HAND INFECTIONS.

Mock (*Surgery, Gynecology, and Obstetrics*, October, 1915) writes on the treatment of hand infections from an economic standpoint, based on a study of 1600 cases, among stockyard workers, etc. Predisposing causes, such as anæmia and chronic disease, are taken into consideration. Mock finds that tonsillitis, one of the chief causes of sick disability among the workers, likewise plays a marked part in the cause of hand infections. In the winter months, when tonsillitis is most prevalent, infections are correspondingly high in the stockyard. Coincidence of tonsillitis and finger and hand infections was noted so often that Mock made bacteriological researches and found that as a rule the same germ was found to be the cause of both. In January and February, 1913, there were 327 cases of tonsillitis and 83 of hand infections. The total number of days of disability from hand infections was 63, and the number of hand infections associated with tonsillitis ("at time or just before infection developed") was 15—that is, 18 per cent. In 1914 an epidemic of streptococcal tonsillitis occurred in Chicago. The total number of cases of tonsillitis under Mock's observation in January and February of that year was 603, and the total of hand infections 117. The total days' disability from hand infections was 208. The number of hand infections associated with tonsillitis was 32, or 27·9 per cent. This greatly increased disability in 1914 was due to 24 very bad cases with marked lymphangitis and tenosynovitis, and Mock is careful to note that all had tonsillitis; 12 were traced to a hæmolytic streptococcus, and the same germ was found in the patient's tonsils; 12 others had a marked lymphangitis, and though the organism was not ascertained, yet the infections were undoubtedly streptococcal and closely related to the tonsillitis.

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#### THE EVOLUTION OF THE NOSE.

"At present no light seems to have been thrown on the evolution of the nose. In a new-born infant there is (we fear) a distinct resemblance to the short, broad, snub, with its wide nostrils, of the negro. The aquiline nose is characteristic of the Jewish race, of many Australians, and certain Indians who live in the high plateaux of Peru; but there has been, so far as the author is aware, no attempt to explain it as a modification due to atmospheric conditions."—G. F. SCOTTELLIOT, "Pre-historic Man and His Story," 1915, p. 100.

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### BOOK RECEIVED.

**Cerebellar Abscess: its Ætiology, Pathology, Diagnosis and Treatment.**  
By *Isidore Friesner, M.D.*, and *Alfred Braun, M.D., F.A.C.S.*  
Price 12s. 6d. London: William Heinemann, 1916,

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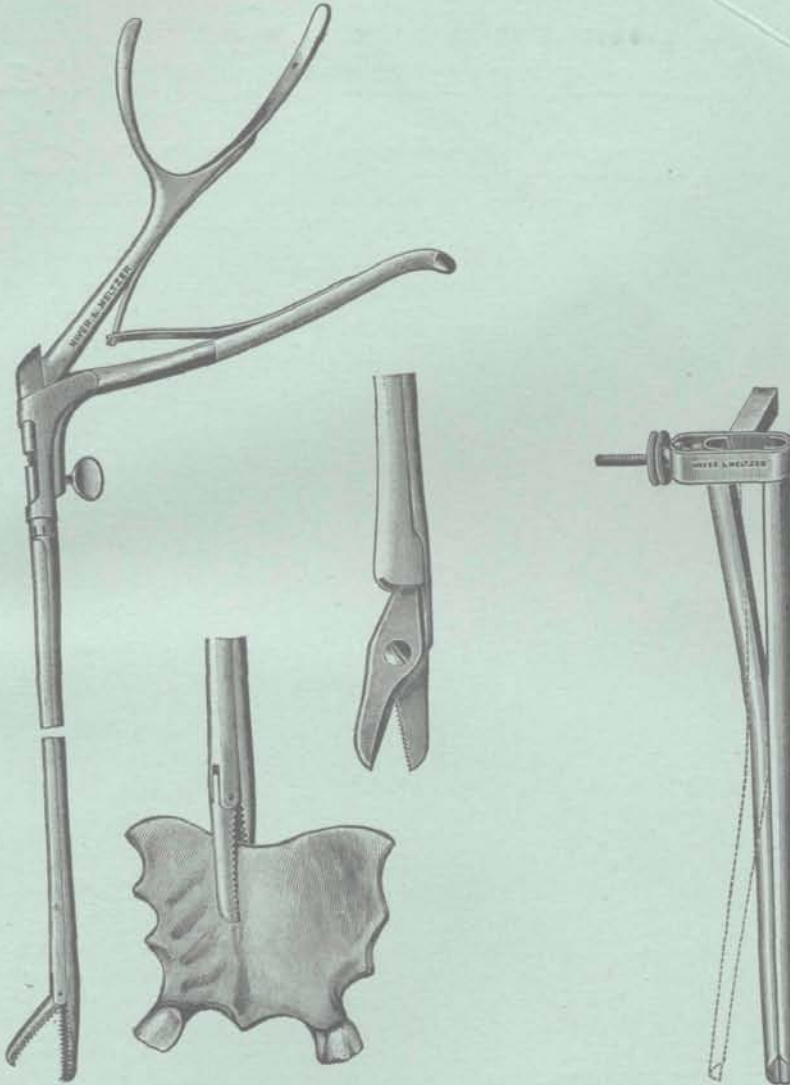
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See *LANCET*, May 13th, 1916.



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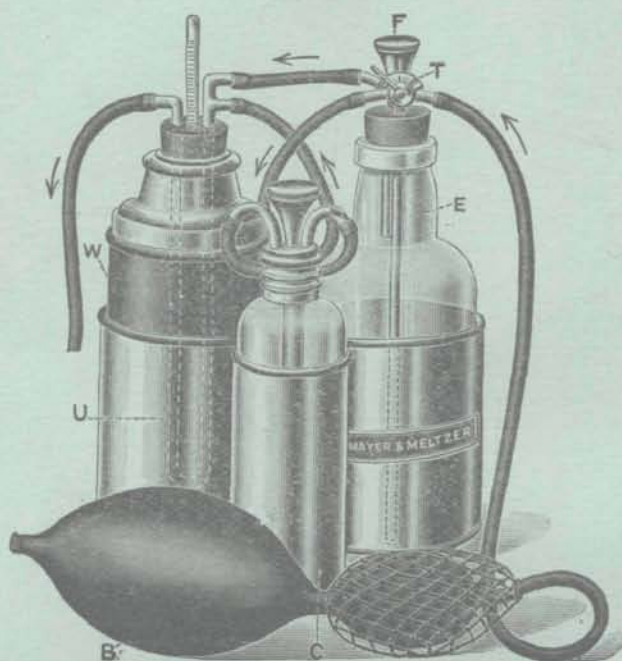
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