districts. During this period the adult female population have mostly taken to hiring themselves as wet-nurses by profession. The district is somewhat isolated, and the result is that the population have closely intermarried. The author conclusively shows that the water supply does not count in the etiology. Heredity, which affects only the females, predisposes to thyroid hypertrophy, and the development of a true goitre is connected with the state of malnutrition and anæmia which, from various causes, prevails at puberty, during child-birth, and especially from frequently repeated and prolonged lactation. The goitres were almost always fibrous, rarely gelatinous, never vascular. The author from his experience is led to deny the view of other writers that there is a connection between disease of naso-pharyngeal adenoid structures and goitre. *James Donelan.*

EAR.

Geronzi, G. (Rome).—*On the Substitution of a Gauze Tampon for Stacke's Guard in opening all the Cavities of the Middle Ear.* "Archiv. Ital. di Otologia," etc., February, 1904, p. 136.

The author points out certain dangers to the osseous lamina it is designed to protect, especially when the gouge is used in this operation. To obviate them he proceeds as follows:—Having opened the antrum, he packs the bottom of the cavity with gauze, and having thus protected it from all accidental shocks, proceeds to break down the external wall with the gouge; as he works on towards the tympanum more gauze is introduced. The gauze is used in much the same way if it is desired to remove first the outer wall of the attic. The author finds that this method renders the operation much simpler and safer, and mentions that Rossi and Ferreri have adopted it "in preference to the classic protector of Stacke," which the author "has always regarded as an enemy rather than a help." *James Donelan.*

Nuvoli, G. (Rome).—*The Acoustic Function of the Semicircular Canals.* "Archiv. Ital. di Otologia," etc., February, 1904, p. 123.

The author, in a most interesting and instructive paper, traces the biological and developmental history of the semicircular canals, which are essentially aquatic organs, having their greatest development and greatest functional activity in fishes. Morphologically they are closely related to the canals of the lateral line and in terrestrial animals, in whom the lateral line has disappeared, continue in relation to an aqueous fluid (endolymph, perilymph). The author describes his researches at considerable length, but the results are in no wise different from those already obtained, the canals being regarded as organs of equilibrium.
James Donelan.

Heiman, Alfred (fils).—*Two Cases of Cholesteatoma of the Middle Ear cured by Intra-aural Treatment.* "La Presse Oto-laryngologique Belge." January, 1904.

A woman, aged thirty-two, the subject of old-standing suppuration of the ear, following scarlatina in infancy, complained of severe pains in the right ear and right side of the head, which came on suddenly two days earlier, after a bath. She had fever, with rigors, rapid pulse, anorexia, furred tongue, and constipation. There was tenderness over the mastoid

and temporal regions, as well as in the meatus. The postero-superior wall of the meatus bulged downwards, and behind it a mass of cholesteatoma could just be seen. The patient having declined operation, the author endeavoured to give relief by other means. He ordered instillations of glycerin with carbolic acid, leeches and ice to the mastoid, and six grains of sodium salicylate to be taken every two hours. Besides this, the tympanic cavity was washed out daily through the Eustachian tube. On the fifth day, during forcible syringing of the ear, a mass of cholesteatoma came away, with immediate relief. Ten days later all disquieting symptoms had disappeared.

The second case was that of a man aged twenty-two, in whom similar symptoms supervened, also after a bath. The mass came away after four days, and a fortnight later the patient was well. *Chichele Nourse.*

Toeplitz, Max.—*The Education of Children with Impaired Hearing.* "The Post-Graduate," January, 1904.

The author points out the sparcity of institutions for these children when compared with those for the education of the blind. He briefly describes the normal hearing, then the hearing in the aurally disturbed child, his psychic development, and finally, his education. It is not the lack of hearing as such, but the conscious impediment in the development of speech that is of extreme detriment to the child with hardness of hearing, since it is thus prevented from thinking.

In dealing with the education of these children Toeplitz thinks that hearing-tubes and similar devices may be used to conduct the child's own voice into the ear for better pronunciation, but not continuously. Pedagogic treatment should begin early, even before the usual school age, as these children are usually much spoiled. The eye and tactile sensations should be practised, particularly the muscular sense, by rhythmic movements of the extremities and organs of speech. For the latter blowing instruments should be used to exercise the inspiration. Above all—and this is to be done at the early stages,—association between the perception of the object and its conception should be methodically taught. The author finally points out that Groszmann holds that a close co-operation of physicians and education is imperative to do full justice to these children. *Macleod Yearsley.*

THERAPEUTICS.

Juliusberg, F. (Frankfort).—*Gummata at the Site of Injection of Preparations of Mercury.* "Münch. med. Woch.," No. 15, 1903.

In some instances the injection of insoluble preparations of mercury has been followed by the formation of swellings presenting many characteristics of gummata. Juliusberg says much care is required in compounding the mercurial salts with the paraffin in order that they may cause no irritation and thereby diminish the likelihood of the development of such swellings. A useful list of references is appended.
Dundas Grant.

Holzapfel (Kiel).—*The Sterilisation of Small Quantities of Surgical Dressings.* "Münch. med. Woch.," No. 16, 1903.

The dressing material is contained in a cylindrical metal receptacle and steam is driven into what is its upper part, during the process, from a