

Mendel.—*Ozæna.* “Méd. Mod.,” Apr. 27, 1895.

CLINICAL lecture. Nothing new.

A. Cartaz.

Gomperz (Vienna).—*Lipomata in the Nasal Mucous Membrane.* “Monats. für Ohrenheilk.,” 1894, No. 9.

A PATIENT, sixty years old, had a tumour the size of a cherry situated on the left side of the septum. Extirpation by the galvano-caustic wire and sharp spoon. The microscopic examination showed that it was a lipoma. A year later no recurrence.

Michael.

Cozzolino.—*Contre les epistaxes du septé et des cavités auriculaires, etc.* “Rev. de Clinique et Therapie.” Année 15. No. 10, 1894.

FROM the author's experiments it appears that a dilute solution of trichloroacetic acid succeeds better in epistaxis than perchloride of iron. He advises the use of this in one per cent. solution combined with a small quantity of cocaine. Hæmostasis is produced without any inflammatory action.

Grazzi.

Arslan.—*Siphylome initial de la fosse nasale droite.* “Archives Italiens de Laryngologie.” Année 14. Fasc. III., 1894.

THE author publishes this case in view of the comparative rarity of cases of primary syphiloma of the nose. The patient was a woman, thirty years of age, from the province of Padua, whose right nasal fossa was occupied by a white and yellow mass situated upon the superior half of the quadrangular cartilage. After exposing the affected part there was seen to be a yellow ulceration of hard consistence. The patient was cured by specific treatment.

Grazzi.

Kayser (Breslau).—*Report on the Cases of Diseases of the Nose, Throat and Ear in Prof. Gottstein's Private Clinic in the Years 1891 and 1892.* “Monatssch. für Ohrenheilk.,” 1894, Nos. 2 and 3.

STATISTICAL review.

Michael.

Winkler (Bremen).—*Is it allowable to apply those therapeutic manipulations which are applied lege artis in suppurations of the Highmorian Antrum, and also in those of the Frontal Sinus?* “Monats. für Ohrenheilk.,” 1894, Nos. 2 and 3.

EXAMINATION with a probe only in such cases should be applied if it is easy to enter by the natural way; but if this way is occluded by bone it is not possible to know how thick this bone is, and it would be dangerous to perforate it by force.

Michael.

Winkler (Bremen).—*On a Misunderstanding produced by my Paper on Treatment of the Frontal Sinuses.* “Monats. für Ohrenheilk.,” 1894, No. 5.

POLEMICAL article.

Michael.

LARYNX.

Schmidt (Laurahutte).—*Clinical History of Pachydermia of the Larynx.* Inaugural Dissertation. Berlin. 1894.

GOOD review.

Michael.

Stepanow (Moscow). — *Pathologic Anatomy and Histology of Scleroma.* "Monats. für Ohrenheilk.," 1894, Nos. 7 and 8.

MORE of pathologico-anatomical interest.

Michael.

Permewan (Liverpool). — *Cases of Laryngeal Paralysis.* Liverpool Medical Institution. "Lancet," Mar. 23, 1895.

Two cases of bilateral laryngeal paralysis. In the first case there was a history of dysphagia and spasmodic dyspnoea; no œsophageal stricture could be detected, but there was complete bilateral abductor paralysis. The patient died from starvation. The *post-mortem* examination revealed cancerous growth, involving both recurrent laryngeal nerves. The second case was one of bulbar paralysis starting with the abductors, the adductors being affected some months after.

Treitel (Berlin). — *Two Cases of Recurrent Paralysis.* "Deutsche Med. Woch.," 1895, No. 20.

(1) A PATIENT, aged thirty years, affected with rheumatism of the joints and hoarseness. The laryngoscope showed paralysis of the left recurrent nerve. Examination of the thorax showed a dull sound over the manubrium sterni. Cure by internal use of Fowler's solution and the faradic current. The author believes that the dulness was caused by a swollen rheumatic lymphoid gland, and that this caused by pressure on the nerve the recurrent paralysis.

(2) A patient, aged fifty-nine years, complained of hoarseness. The laryngoscope showed paralysis of the right vocal cord. The whole larynx was inclined to the left side. On the right side of the neck was a tumour the size of an apple, of bony hardness in consistence. The tumour was believed to be a malignant goitre, and it was thought that it caused the recurrent paralysis. The tumour was extirpated, and turned out to be a benign cystic goitre. The recurrent nerve was not pressed on by the tumour. By pressure on any part of the neck the voice could be restored for some time. Four years later, no return of the tumour, but no improvement of the voice.

Michael.

Neumayer (Munich). — *On a Musculus Thyroideus Transversus.* "Monats. für Ohrenheilk.," 1894, No. 10.

NEW observation of this rather rare abnormality.

Michael.

Audubert. — *Tertiary Laryngitis and its Treatment by Sulphuretted Luchon Mineral Waters.* "Journ. de Méd., Bordeaux," Apr. 14, 1895.

AUDUBERT relates the good effects of these mineral waters in tertiary syphilitic manifestations in the larynx, after or simultaneously with the specific medication. He prescribes the various springs of that mineral station according to the intensity of the lesions. Inhalation or "humage" is specially advantageous. *A. Cartaz.*

Claude, H. — *Sub-Glottic Laryngeal Tuberculosis, Stenosis, Intubation.* "Bull. Soc. Anat., Paris," Mar. 15, 1895.

A GIRL of fourteen years, admitted into the Children's Hospital for laryngeal stenosis, secondary to pressure on the recurrent nerves produced by tracheo-bronchial adenopathy. Intubation during five days. Respiration easier, but general state badly affected. Fever, emaciation, death by sudden suffocation, tracheotomy not restoring the breathing.

At the necropsy extensive ulcerations and polypoid vegetations, of tuberculous nature, in the inferior part of glottis and superior part of trachea. Considerable development of bronchial adenitis involving the recurrent nerves. *A. Cartaz.*

Tsakiris.—*New Method of Intubation of Larynx.* "Gaz. des Hôp.," May 14, 1895.

MODIFICATION of O'Dwyer's instruments. The tube is made of aluminium.

A. Cartaz.

Henry.—*Three Cases of Intubation in Croup.* "Bull. Méd. du Nord," Apr. 26, 1893.

NOTHING new.

A. Cartaz.

Bonain.—*Treatment of Laryngeal Stenosis in Croup, and specially by Intubation.* "Bull. Méd.," Apr. 17, 1895.

BONAIN advocates intubation in preference to tracheotomy in diphtheritic laryngitis. According to the numerous statistics, before and since the introduction of antitoxin, the death-rate is always and in various countries less than with tracheotomy. He uses, together with sero-therapy, calomel fumigations (one gramme every two hours) as has been indicated by Dillon Brown ("Med. News," May, 1894). When the stenosis is pronounced, he practises intubation, not leaving the thread. During the continuance of intubation he orders steam inhalation. The tube is withdrawn on the fourth day, in general.

Bonain insists on the facilities and safety of that method and believes it must, in the majority of cases, be substituted for cutting operations. *A. Cartaz.*

Castelain.—*Statistical Study of a Hundred Cases of Tracheotomy for Diphtheritic Laryngitis.* "Bull. Méd. du Nord," Apr. 12, 1895.

CASTELAIN relates in detail a hundred tracheotomies for diphtheria. He has had thirty-nine cures. He gives an interesting relation of other—French or foreign—statistics, before the introduction of sero-therapeutics. *A. Cartaz.*

Remeboth (Halle).—*Death of a Tracheotomized Patient by Hanging.* "Vierteljahrsschriften Gesichl. Med.," 1895, Heft 2.

THE patient came in the hospital on account of tumours of the neck compressing the trachea and œsophagus. The epiglottis was changed into a large œdematous tumour. The patient could not swallow at all, and it was impossible to introduce a probe, because when it was tried the patient became asphyctic. Tracheotomy was performed, and the patient was fed with an œsophageal tube for six weeks. Then the introduction of the tube became more and more difficult, and of late it has become impossible. The patient became feverish, and coughed out gangrenous pieces of the lung, so that it was certain that there was a perforation of the œsophagus into a lung. The patient's strength was relatively good. Six weeks after his entering the hospital the patient was found hanged by a blind cord. The cord was situated over the canula, and the opening of the canula was free. The *post-mortem* examination showed the arteries of the base of the brain strongly filled; medulla oblongata not changed. On the neck a number of enlarged hard tumours. The strangulation mark began on the mandibular angle, and continued over the anterior part of the neck. The muscles of the neck were intact. Both external carotids showed a rupture of the intima. The vertebral column was intact. The muscle of the heart slightly brown, but well contracted. How long the hanging had lasted when the exitus occurred cannot be said. The pathological state of the organs was the same as is found in other cases without canula. The author has found three similar cases in literature. Experiments made by the author in rabbits, which were hanged without tracheotomy or after it, gave the following results: Death arose, when the trachea was not opened, in one to three minutes;

when it was opened, in ten to twenty minutes. In both cases the pulsation of the heart lasted a minute and a half longer than the respiration. Convulsions were observed without or with tracheotomy. Consciousness seemed to persist longer in tracheotomized cases. In non-tracheotomized cases the temperature arose in a short time to 40°; in tracheotomized, only some tenths of a degree. The *post-mortem* examination gave in both cases the same results. *Michael.*

Kobler (Sarajeur).—*Foreign Bodies in the Bronchi and their Consequences.* "Wiener Klin. Rund.," Nos. 12, 13, 14, 15, 16, 17, and 18.

EXTENSIVE treatise on this subject. A great number of cases carefully collected from literature. Only those cases can here be reported which were observed by the author himself. (1) A patient, twenty-three years old, was affected for a year. He had severe cough, bloody expectoration, and slight fever. The phalanges showed the Hippocratic degeneration. The right half of the thorax was better expanded than the left. Slight dulness in the upper parts of both sides. The heart was displaced, its apex-beat being found in the fourth right intercostal space. In the right lower parts dulness, in the posterior upper parts tympanic percussion sound, metallic rhonchi and bronchial amphoric breathing. There was a great deal of purulent secretion, without tubercle bacilli. The presence of a large cavity made it probable that there was a foreign body in the right bronchus. The *post-mortem* examination showed a large number of cavities in the right lung, and also that they were caused by a foreign body, although a foreign body was not found. (2) A patient, aged forty-five, had for some months a severe cough, since she had inspired a plum-stone, as she said herself. Over the whole right side there was dulness, and the respiration sounds and fremitus were diminished. Some months later, during a severe attack of coughing the foreign body was expectorated, and the patient cured in a short time. The author concludes that in the absence of pathological symptoms experimental attempts at extraction are not indicated, but the patient must remain under medical observation. If pathological symptoms and consecutive disturbances arise, and the foreign body is not expectorated, or if it is mobile, so that it might occlude the glottis, tracheotomy, with subsequent emetics, or attempts at extraction, should be performed. *Michael.*

THYROID, & C.

Schein, Moritz (Vienna).—*The Secretion of the Thyroid Gland in Milk.* "Wiener Med. Woch.," 1895, Nos. 12, 13, 14, 15.

IN congenital absence of the thyroid gland the consequences do not arise till the feeding is no longer exclusively milk. Sometimes tetanus arises during lactation in women. The author reports three cases from literature in which the first symptoms of myxœdema arose as the exclusive feeding with milk ceased. This fact shows that it will be useful to feed strumous, tetanic, cretinic, and myxœdematous patients with milk. To prevent tetanus during lactation it will be advantageous to feed the mother also chiefly with milk. The author also relates a case in which myxœdema followed lactation. *Michael.*

Lanz (Bern).—*Feeding with Thyroid Gland. Can the Thyroid Gland of Swine be successfully employed?* "Correspbl. für Schweizer Aerzte," 1895, No. 10.

EXPERIMENTS on animals prove that the thyroid gland of swine is as efficacious as that of calves and sheep. *Michael.*