

three deaths). With serum treatment the percentage is considerably modified : fifty-two cases in adults, two deaths ; forty-eight in children, nine deaths. After the injections of serum some exanthemata have been noticed ; the albuminuria was not badly influenced by that treatment. According to the author, diphtheria should be more frequent in adults than is ordinarily admitted, many cases of follicular amygdalitis having a diphtheritic origin, which cannot be diagnosed without bacterial examination. *A. Cartaz.*

D'Astros, L., and Engelhardt.—*Diphtheria and Antitoxin Treatment at Marseilles.* "Bull. Soc. Méd. des Hôpit., Paris," Apr. 19, 1895.

THE statistical results are similar to the first given by Roux, Martin, Moizard, etc. From the 15th December to the 7th April the authors have treated ninety-six patients—twenty-three with pseudo-membranous anginas, seven coccus, one staphylococcus, six streptococcus, and eight cases of non-diphtheritic croup.

The seventy-three cases of true diphtheria are divided into :

Pure diphtheritic angina	...	...	26 cases, 5 deaths.
Diphtheria and coccus angina	...	...	2 " 0 "
Diphtheria and staphylococcus	...	...	1 " 1 "
Diphtheria and streptococcus	...	...	5 " 2 "

The thirty-one cases of diphtheritic, pure or associated, laryngitis (croup) gives thirteen deaths : mortality, thirty-four per cent. instead of eighty-nine per cent. the three preceding years. The authors have observed the habitual effects of the injections of serum, rubeolic or urticarial rash, rheumatoid pains ; they mention an action on the menstrual function, which is advanced and sometimes more profuse. *A. Cartaz.*

MOUTH, PHARYNX, &C.

Sendziak (Warsaw). — *Contribution to the Etiology of Black Tongue.* "Monatssch. für Ohrenheilk.," 1894, No. 4.

In a case of black tongue the author removed by the sharp spoon a portion of the surface of the tongue and found a micro-organism, which he has carefully examined and called a *mucor niger*. *Michael.*

Jaruntowsky (Posen). — *Etiology of Tuberculous Affections of the Mouth.* "Münchener Med. Woch.," 1895, No. 18.

A PHTHISICAL patient, forty years old, complained for some days of pains in swallowing. In the region of the left molar tooth there was an ulcer covered with a necrotic slough. In the circumference there was inflammation and miliary tubercles in the tissue. The gum also was ulcerated. Extraction of the carious lower molar tooth was effected. The examination of the contents of the carious cavity showed conglomerations of tubercle bacilli. Some weeks later, death. *Michael.*

Nissins, J.—*Disorders of Speech in Neuroses (Hysteria, Chorea, Paralysis Agitans).* "Gaz. de Hôp.," Apr. 13, 1895.

CRITICAL review, with a study of hysterical mutism and [stammering. Nothing new. *A. Cartaz.*

Fullerton, R.—*Abnormality of Fauces.* "Glasg. Med. Journ.," April, 1895.

REPORT of a case. The patient was a woman of twenty-nine. The external portion of each anterior pillar was occupied by an elongated oval opening, extending from the level of the base of uvula down almost to the lingual attachment. The right posterior pillar was represented by a detached band of mucous membrane, in the position of the free edge of the normal pillar. The left posterior pillar and both tonsils were absent. Over the greater part of the pharynx the mucous membrane had been destroyed, leaving the submucous fibrous layer exposed without true cicatricial formation. There was no history of syphilis, nor of any acute affection of the throat.

Beausoleil.—*Tonsillar Calculus.* "Mercredi Méd.," Apr. 24, 1895.

NOTHING particular. The calculus was of a whitish-grey colour, dense in consistency, and of considerable size (one centimètre and a half in diameter).

A. Cartaz.

Dieulafoy.—*Latent Tuberculosis of the Three Tonsils.* "Bull. Acad. de Méd.," April 30 and May 7, 1895.

THE author considers as frequent that form of latent tuberculosis characterized by hypertrophy of lymphoid tissue in the pharynx and throat, and subsequently by the hypertrophy of lymphatic cervical and submaxillary glands. As proof of that frequency he has inoculated guinea pigs with portions of hypertrophied tonsils and adenoid vegetations. Sixty-one animals were inoculated (under the skin in subcutaneous connective tissue) with pieces of palatine tonsils; there resulted tuberculous manifestations, tuberculous ulcer in the site of inoculation, mesenteric tuberculosis, etc., in eight cases (12 per cent.). Thirty-five times the inoculation was practised with adenoid vegetations, and seven times the tuberculosis appeared (20 per cent.).

That variety of tuberculous tonsillitis is probably the result of cohabitation with a tuberculous person, or of consuming impure aliments. *Lymphatic, strumous* subjects are more disposed to contract the contagion, and the bacillus can provoke changes, and hypertrophy of lymphoid tissue. The first stage is that of hypertrophy; the second, hypertrophy of lymphatic glands; the third, propagation to the lung (pulmonary tuberculosis).

He insists on prophylactic measures, pure food, perfect state of rooms for the children, good hygienic prescriptions, salt baths, sea baths, cod liver oil, etc.

A. Cartaz.

Trifiletti.—*Amygdalæ.* "Encyclopédie de Médecine Italienne." F. Vallardi. Milan, 1894.

IN this work the author discusses all relating to the palatine tonsils, the anatomy, physiology, pathology and treatment of these organs. In speaking of tonsillar hypertrophy, Trifiletti remarks that physicians and others in general have no strict ideas of the indications which ought to be taken into consideration when it is necessary to intervene actively in this morbid condition. To assist in the diffusion of knowledge upon this chapter of tonsillar pathology, the author thus reviews the indications for surgical intervention in cases of hypertrophy of the tonsils:—

1. If the volume of the tonsils has arrived at such a degree as to render respiration difficult, especially in bed, in these cases the hypertrophy is hurtful to the development of the chest and the whole organism.
2. If the tonsils only slightly hypertrophied are frequently attacked with inflammations.
3. If the tonsillar hypertrophy affects in any degree the hearing. In these

cases, before commencing any treatment of the ears, it is necessary to reduce the tonsils to a small size.

4. If the breath becomes offensive from the enclosure of particles of food in the tonsillar lacunæ. *Grazzi.*

Teissier (Paris).—*Pseudo-membranous Angina in a Syphilitic Patient with the Parasite of Thrush.* "Arch. de Méd. Experiment.," vii., Feb., 1895.

TEISSIER relates the curious case of a syphilitic woman who, in the sixth month of pregnancy, was admitted into the hospital for a pseudo-membranous angina. On the pillars of the fauces were two white patches, pseudo-membranous and similar to diphtheritic sore throat. The bacteriological examination and cultures showed the pure mould of thrush between epithelial cells, without any other microbe. The mucous membrane of the mouth was not red, the woman was not cachectic, conditions generally favourable to the development of thrush. *A. Cartaz.*

Monro, T. K.—*Case of Simultaneous Ulceration of the Lymphatic Tissues of the Throat and Intestines, with Suppuration of the Corresponding Glands in the Neck and Mesentery.* "Glasg. Med. Journ.," May and June, 1895.

THIS occurred in a sewer labourer, who complained of a swelling about the size of a hen's egg behind the right sterno-mastoid, and ulceration of the pharynx. This swelling was incised, a large quantity of pus being evacuated. After the operation the temperature rose, and remained high, delirium set in, and for ten days before death there was diarrhœa.

After a detailed description of the conditions found *post-mortem*, and summarized in the title, the author discusses the mode of invasion. (1) The virus may have settled in the tonsils and neighbouring lymphatic tissues, some of the organisms were then swallowed, and affected similar tissues in the intestine; (2) the virus may have settled primarily in the follicles of the intestine, the tonsils being infected later; (3) the invasion may have taken place independently and nearly simultaneously in the throat or bowel.

Herzfeld (Berlin).—*Treatment of Pharyngitis Granulosa and Lateralis.* "Monatssch. für Ohrenheilk.," 1894, No. 5.

THE author recommends the radical removal of the granulations and lateral bands. *Michael.*

Stein (Moscow).—*Case of Gangrena Faucium Primaria.* "Monatssch. für Ohrenheilk.," 1894, No. 5.

A PATIENT, twelve years old, had for six months dyspnœa and fever. Auscultation and percussion showed disease of the heart. Speech had a nasal *timbre*. Negative result of examination of nose and throat. The temperature and pulse proved the presence of fever during the following weeks. Fourteen days later there was difficulty in swallowing, swelling of the glands of the neck, swelling of the left tonsil and *fœtor ex ore*. This process extended for fourteen days till the left tonsil, the palate and uvula were changed into a blackish ichorous ulcer with powerful fœtor. In spite of all treatment the propagation of the gangrene was not interrupted, and three weeks later the child died. The *post-mortem* examination showed hydrops pericardii without true morbus cordis, pneumonia and total gangrenous destruction of the pharynx and naso-pharynx. *Michael.*

Felix (Vienna).—*Two Sarcomata of the Posterior Pharyngeal Wall.* "Monats. für Ohrenheilk.," 1894, No. 8.

(1) A PATIENT, fifty-nine years old, complained of difficulty in swallowing for some weeks. No abnormal laryngeal symptoms. The laryngoscope showed a

tumour the size of the little finger, situated on the posterior surface of the posterior wall of the larynx. The tumour, as examination with the probe showed, was fixed on the posterior wall of the pharynx. Extirpation with the galvano-caustic wire. Microscopical diagnosis, spindle-celled sarcoma. Cure. No recurrence. (2) A patient, aged seventy-three, had stenotic noise in respiration, without subjective symptoms. The laryngoscope showed a large tumour filling the whole space between epiglottis and pharynx, and covering the whole larynx. The tumour was of a greyish-red colour, and the size of a walnut, was mobile, and situated on the posterior pharyngeal wall. Extirpation. Cure. The microscope showed spindle-celled sarcoma. *Michael.*

Fasano. — *Un cas de pemphigus de la muqueuse pharyngienne et trachéale.* "Archives Internationales." Fas. 10. Naples, 1894.

THE author reports a very rare case of pemphigus which developed only upon the pharyngeal and tracheal mucous membranes. Diagnosis is very difficult when this disease is not manifested on the skin. In this paper the author enters into the differential diagnosis between the ulcerations of pemphigus, syphilis, tuberculosis, etc. *Grazzi.*

Lieven (Aachen).—*Contribution to the Treatment of Syphilitic Adhesions of the Soft Palate and the Posterior Pharyngeal Wall.* "Münchener Med. Woch.," 1895, No. 21.

THE author operates during narcosis with scissors. The after-treatment consists in the application of an air-filled soft rubber balloon, to prevent adhesion and the contraction of the cicatrices. In one case operated on with good result, the patient had afterwards "rhinolalia aperta," and difficulties in swallowing. The author says that not all cases should be operated on, because sometimes the condition of the patient is worse than before operation. *Michael.*

Stein, Von (Moscow).—*First Published Case of Pharyngitis Phlegmonosa Acuta, complicated with Meningitis Purulenta.* "Monats. für Ohrenheilk.," 1894, No. 10.

A PATIENT, thirty-two years old, came to the hospital complaining of fever and difficulty of swallowing. The right tonsil was red and swollen. On incision there was a discharge of pus. The tonsil was better a few days, but there arose a swelling of the parotid, and œdema of the right eye. During the next few days the temperature rose to 40°; deafness; delirium; death. The *post-mortem* examination showed purulent infiltration of all soft parts of the fossa sphenopalatina. The pus found its way by both fissuræ orbitales inferiores to the basis cranii, and produced meningitis and obstruction of the lobus parietalis. In the masseter muscle an abscess was found. *Michael.*

Corradi.—*De la fréquence des végétations adénoïdes dans l'espace nez-pharyngien en Italie.* "Bull. des Mal. de l'Œreille, etc.," Dec., 1894.

THE author declares the belief to be unfounded that in Italy, especially in certain regions (he practises in Verona), adenoid vegetations are rare. Corradi, on the contrary, believes that in diseases of the ears, especially in the cases of children attacked with catarrhal and suppurative otitis, adenoid vegetations often exist in considerable quantity. They ought to arrest the attention of the otologist more than of the rhinologist or laryngologist, and those who are occupied with these latter specialties in Italy imagine erroneously that adenoid vegetations are rare. Corradi describes in this work the operative method which he prefers, which does

not differ from that usually practised, except in the use of a curette of his own invention. *Grazzi.*

D'Aguanno.—*Sur le phase de regression ou de guérison des tumeurs du pharynx et du naso-pharynx.* “Boll. delle Mal. dell'Orecchio, etc.,” Oct., 1894.

AMONG the different retrogressive metamorphoses which tumours may undergo, there are some, although rare, which sometimes lead to the partial or total destruction of the neoplasm, and then to its diminution or complete disappearance. This process, which may occur to all tumours, not excepting malignant growths, has been noted especially in naso-pharyngeal tumours. This retrogression is produced, according to D'Aguanno, by alterations in the structure in the walls of the blood-vessels of the tumour and their contents. *Grazzi.*

Leech and Grosvenor (Manchester).—*Epithelioma of Œsophagus opening into Trachea.* Pathological Society of Manchester. “Lancet,” Mar. 30, 1895.

THE epithelioma was situated in the middle of the cesophagus, encircling the tube, and opening by a large perforation into the trachea.

NOSE, & C.

Tesier.—*New Method for the Administration of Ethylbromide in Rhino-Otology.* Thèse de Paris, 1895.

TESIER advocates the method as safe and sufficient for most rhino-otologic operations, adenoid vegetations, hypertrophied tonsils, aural polypus, paracentesis of tympanum, etc. He uses a dose of three to five grammes for children from three to eight years; five to ten grammes for children from eight to fifteen years. That dose is sufficient to put an end to cerebral inhibition, for the abolition of perception of pain, *apsychie*, as he terms that inebriate period of anæsthesia. Excellent review of the history of that anæsthetic, with experimental and physiological researches. *A. Cartaz.*

Lens (Kiew).—*A New Nasal Dilator.* “Wiener Med. Woch.,” 1895, No. 18.

A SELF-RETAINING nasal speculum. *Michael.*

Gerber (Königsberg).—*Rhinoliths, a Product of Bacteria.* “Monats. für Ohrenheilk.,” 1894, No. 10.

POLEMICAL article. *Michael.*

Ficano.—*Sur le rapport qui existe entre les organes genitaux et le nez.* “Bull. des Mal. de l'Oreille, etc.” Florence, Nov., 1894.

THE author reports the opinions of several authors on this subject. *Grazzi.*

Clément, G.—*Relations of Nasal Diseases with the Respiratory Organs.* Thèse de Paris, 1895.

CLÉMENT relates some cases in demonstration of the injurious influence of nasal diseases (obstruction by deviations of septum, polypus or infectious rhinitis, etc.) upon the etiology and course of some laryngo-tracheal or bronchitic inflammations. Nothing new. *A. Cartaz.*