

ment of cancer in another part of the body. A third patient is dead from another cause. Laryngo-fissure alone has yielded a lasting cure in 80 per cent. of cases. Laryngo-fissure, supplemented by excision of the larynx in a case of local recurrence, has preserved 90 per cent. of the patients. In the only two cases in which there was local recurrence the disease reappeared within the year following the operation of laryngo-fissure. This fully confirms Sir Felix Semon's conclusion that there is little or no anxiety as to return of intrinsic cancer if the larynx remains free for twelve months.

Some points of diagnosis—mobility of the affected cord and preliminary microscopic examination of removed portion—are then referred to, and the paper concludes with some consideration of anaesthesia and surgical technique. *Author's abstract.*

EAR.

Snow, Sargent F.—Acute Middle-ear and Mastoid Inflammations: The Relations of Active Auto-intoxications. "Lancet," October 14, 1911, p. 1070.

Snow draws attention to the fact that constitutional as well as surgical treatment is called for in these cases, and that closer observations on acute pharyngeal, nasal, sinus, middle-ear and mastoid inflammations are invariably related to an active autotoxic state of the system. He considers mercury, iodine, and similar "alteratives" are antigens. He prescribes calomel in doses of $\frac{1}{10}$ gr., frequently repeated up to 1 $\frac{1}{2}$ gr., followed by a dose of castor-oil and salines. This plan is repeated in two days and continued every second day until active symptoms are subsiding. During convalescence, calomel, in good dosage at least every five days, is given as an intestinal cleanser, glandular stimulant, and corrective. *Macleod Yearseley.*

REVIEWS.

A Practical Handbook of the Diseases of the Ear for Senior Students and Practitioners. By WILLIAM MILLIGAN, M.D., Aurist and Laryngologist to the Royal Infirmary, Manchester, etc., and WYATT WINGRAVE, M.D., Pathologist to the Central London Throat and Ear Hospital, and to the Polyclinic, London. With 293 illustrations and 6 coloured plates. Pp. 596. London: Macmillan & Co., 1911.

The book before us is decidedly a remarkable work, destined to pass through numerous editions. It is of course a conscientious and, at the same time, a compendious study of diseases of the ear, but it has the special characteristic of being founded on original investigations into the bedside and laboratory pathology of the organ of hearing, unhampered by traditions. The authors are well known in their respective spheres, and accordingly the subject is vigorously dealt with from both points of view. There is an interesting sketch of the development of the ear, containing much information in few words, followed by a chapter on the anatomy from the naked eye and microscopical points of view, the latest edition of "Quain's Anatomy" being drawn upon for a few of the illustrations, the majority being, however, from original preparations and