

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.* "Glasgow Med. Journ.," May, 1895.

A SEWER labourer was admitted, under Dr. Parry, suffering with an ulcerated pharynx, and with an abscess of a cervical gland on a level with the pomum Adami, with enlarged cervical glands. He died ten days after admission, with high temperature, delirium and diarrhoea. *Post-mortem*, the ulceration extended from the right tonsil and pharynx to the interior of the larynx. There was pus in the cellular tissue of the neck. The glands were enlarged. There were general signs of peritonitis. The lymphoid follicles were inflamed and ulcerated. Peyer's patches were honeycombed with abscesses. *R. Lake.*

Seimon, F.—*Some Practical Remarks on Foreign Bodies in the Upper Air and Food Passages, and on the Principles of their Removal.* "Med. Chron.," April, 1895.

THE author lays down as the principles which should guide the practitioner in laryngeal and œsophageal cases that (1) no foreign body, the presence of which has been actually detected, ought to be allowed to remain impacted, even if at the time it does not produce any serious symptoms; (2) no attempt should be made to ram an angular or pointed body forcibly down.

The author next relates several unpublished cases illustrating the importance of the above rules, concluding his most comprehensive article with a case which illustrates the necessity of receiving a patient's own history with caution, the patient asserting to the author that her medical adviser had pushed the foreign body down her throat, and subsequently informing another surgeon that the author had done so; there being no foreign body present at all. *R. Lake.*

Allen, Harrison. — *Foreign Bodies in the Œsophagus.* "New York Med. Journ.," Aug. 17, 1895.

EIGHTY-TWO published cases are analyzed and the points considered, divided under the following headings:—

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| 1. Spasmodic stricture, regurgitation of food, and softening of the œsophageal walls. | 7. Anxiety. |
| 2. Emphysema. | 8. Abscess. |
| 3. Interference with respiration. | 9. Emission of air from œsophagus. |
| 4. Excessive mucous secretion. | 10. Pain. |
| 5. Nausea and vomiting. | 11. Convulsions. |
| 6. Hamorrhage. | 12. Syncope. |
| | 13. Miscellaneous. |

The rapid softening of the œsophageal walls has not been sufficiently dwelt on, nor has the significance and importance of empyema, the excessive mucous secretion and the possibility of emission of air, and too much stress has been laid on pain and convulsions, and not enough on anxiety (in adults). *R. Lake.*

E A R, N E C K, & C.

Freudenthal, W.—*Electro-Vibratory Massage of the Ear, Nose and Throat* "New York Med. Journ.," Sept. 28, 1895.

IMPROVEMENTS in the instrument described in the "Med. Record" of July 22nd, 1895. *R. Lake.*

Ball, F. P.—*Otitis Media as a Complication of Pneumonia.* "Med. News," Sept. 21, 1895.

AFTER alluding to the work of Rasch in this connection, the author details three cases, and urges the necessity of aural examination in cases of broncho-pneumonia with head symptoms. *R. Lake.*

Barling, Gilbert.—*Acute Suppuration of Middle Ear, Septic Thrombus of Internal Ear, Jugular Vein, and Pyæmia, without involvement of Mastoid Antrum.* "Birmingham Med. Rev.," Oct., 1895.

DESCRIPTION of a case in which the antrum and floor of the middle fossa were explored without result. A large clot was found in the jugular vein at the *post-mortem.* *R. Lake.*

Galliard.—*Acute Thyroiditis ending in Resolution.* Soc. Méd. des Hôp., Paris, June 21, 1895.

A WOMAN, aged forty years, with no hypertrophy of the thyroid. After a cold during convalescence from influenza cervical pains arose, dysphagia, and fever, with chills. Within a few days after there was painful tumefaction of the right lobe of the thyroid, the left lobe being feebly enlarged. There was no irritation of the fauces or pharynx; no adenitis; no albuminuria. The author diagnosed an acute thyroiditis from influenza. In eight days complete resolution took place under antiphlogistic local treatment. *A. Cartaz.*

Ingals, E. F. and Ohls, H. G.—*The Treatment of Goitre and Exophthalmic Goitre with Thyroid Extract.* "New York Med. Journ.," Sept. 7, 1895.

SIX cases are reported in full, and forty-four others are collected, the results of treatment being reduction in thirty-eight cases; headache was observed in eighteen, dizziness in twenty, trembling in fourteen, rapid pulse in eleven, weakness in seventeen, nausea in seven, loss of weight in twenty-five, in the cases where the symptoms were noted, and when exophthalmos was present it was not affected, nor were cysts of the thyroid. *R. Lake.*

Gibson, F. L.—*Excision of Enlarged Right Lobe and Isthmus of Thyroid Gland.* "Inter-Colonial Journ.," May, 1895.

DESCRIPTION of a case, with operation. *R. Lake.*

Bacon, G.—*A Case of Sarcoma of the Neck, involving the Tonsil, and causing Deafness in a Boy of Seven Years.* "New York Med. Journ.," Aug. 31, 1895.

WHEN first seen the patient exhibited a tumour just below the left ear of sudden origin, watch $\frac{9}{16}$; in ten days the tumour had increased enormously, and the left tonsil was much enlarged, hard, and painless. Exploratory operation showed the impossibility of removing the growth, which proved to be a sarcoma. Dr. W. B. Coley injected the mixed erysipelas and bacillus prodigiosus serum, and which was continued for seven days, when septic symptoms set in, accompanied by facial palsy on the affected side. Death occurred four days after the last injection. *R. Lake.*