

Richter, Ernst (Halle-a-S.).—*Die nicht perforirende eidernde Entzündung der Siebenhöhlen und ihre operative Behandlung.* (*The Non-Perforating Purulent Inflammation of the Frontal Sinus, and its Treatment*). Inaugural Dissertation. Leipsic, 1895.

GOOD review of the literature and the present position of the treatment of the disease. The author adds seven cases treated in Habermann's clinic in Graz. All cases have improved or been cured. *Michael.*

Gussenbauer (Vienna).—*Temporary Resection of the Nose for Entrance into the Frontal Sinus, the Ethmoid and Orbital Cavities.* "Wiener Klin. Woch.," 1895, No. 21.

THE author has in two cases removed malignant neoplasms of the ethmoidal region and extending round the circumference by temporary resection of the nose. Both patients have been cured. The details are of surgical interest. *Michael.*

Czerny (Heidelberg).—*Osteoplastic Opening of the Frontal Sinus.* "Langenbeck's Archiv," Band 50, Heft 3.

THE author recommends not to remove the anterior osseous wall of the frontal sinus, but merely to dislocate it, and to close with it the sinus after the cure of the empyema. He performed this operation twice with good result. *Michael.*

Hessler (Halle-a-S.).—*Operation for Adenoid Vegetations with the New Pharyngotome of Schutz.* "Münchener Med. Woch.," 1895, No. 24.

RECOMMENDATION of the instrument. *Michael.*

Fouchier, A. A.—*A Few Modifications in the Operating Process of Adenoid Tumours.* "Arch. of Ophthal. and Otol.," April, 1895.

A DESCRIPTION of a combined tongue depressor and mouth-gag, and a modified Higuet-Munger's curette, the handle of the latter being at a right angle to the shaft, and with a Gottstein's blade instead of a ring knife. *R. Lake.*

Hamilton, H. B.—*Some Interesting Conditions attending Post-Nasal Growths.* "Montreal Med. Journ.," Aug., 1895.

THE first was a case complicated with rhinitis, and giving rise to asthma, which was cured by treatment of the rhinitis and removal of the growths; the other a case of ethmoidal disease caused by a similar condition and relieved by treatment of the rhinitis. *R. Lake.*

NECK, THYROID, &c.

Notkin (Kiew).—*Contribution to the Physiology of the Thyroid Gland.* "Wiener Med. Woch.," 1895, Nos. 19 and 20.

THE author has produced a proteid from the thyroid gland which he calls thyrotoxin. By injection of this proteid into animals he produced all symptoms of cachexia strumipriva. He concludes from his experiments that the thyro-colloid is not a secretion of the thyroid gland, but a secretion of the whole body. The thyro-proteid is the poison which intoxicates the organism in cases of cachexia strumipriva. The function of the thyroid gland is the purification of the body from thyro-proteid. The gland removes it from the body along with its toxic power. It is probable that Basedow's disease will be successfully treated by application of thyro-proteid. *Michael.*

Scherk (Hamburg).—*The Function of the Thyroid Gland*. "Aerzte Rundschau," 1895, No. 25.

REVIEW.

Michael.

Revillod (Geneva).—*On Thyroidismus*. Schweizer Aerzte in Lausanne, Meeting, May 4, 1895.

TWO groups of symptoms are chiefly caused by anomalies of the secretion of the thyroid gland—myxœdema and Basedow's disease. The latter is produced by excess of secretion; the former by decrease of secretion. Also on the substance of the bones the Basedow (Graves) disease has an influence, as well as upon diuresis. Cod liver oil is a good medicament for the symptoms of Basedow's disease.

MORIN (Colombier): Much in this question is not yet clear. It is curious that in some cases the symptoms of Basedow's disease are influenced for good by the use of thyroid gland. The author has observed some families in which those who had goitres were healthy; the others with atrophic thyroid glands became tuberculous.

GIRARD (Berne) also has made investigations on the relation between goitres and tuberculosis which were first observed in the first quarter of this century, and has found that malignant tumours (excluding struma maligna) are observed three times more frequently in strumous than in non-strumous persons. Tuberculosis is three times more frequent in non-strumous than in strumous persons. As to diseases of the heart, there exists no difference. Fractures of the bones are much more frequent in strumous persons. Traumata are equally observed in strumous and in non-strumous persons.

Michael.

Eulenburg (Berlin).—*Abuse of Thyroid Tableids*. "Deutsche Med. Woch.," 1895, No. 32.

FOR lipomatosis, since Leichtenstern's publication, these tableids have been often used by patients without medical advice. Their employment is often followed by severe nervous symptoms. The sale of thyroid in tableids without restriction should not be allowed.

Michael.

Grube (Neuenahr).—*Etiology of Basedow's Disease*. "Neurol. Centralbl.," May, 1894.

THE author believes that the disease is caused by auto-intoxication. *Michael.*

Pel P. K. (Amsterdam).—*Myxœdema*. "Volkman's Vorträge," Heft, No. 123. REVIEW and photographic reproductions of two cases of myxœdema treated by the author with thyroid gland with good results. *Michael.*

Lichtwitz (Bordeaux).—*Branchial Fistula in the Neck cured by Electrolysis*. "Arch. d'Electricité Médicale," April 15, 1895.

THE fistular orifice was situated about two centimètres to the left of the middle line between the hyoid bone and thyroid cartilage. A whalebone probe was passed upwards and inwards to the right for six and a half centimètres behind the great cornu of the hyoid, and could be felt by the patient at the level of the right tonsil. Treatment was called for on account of the discharge, which involved the continuous wearing of a dressing, but cutting operations were refused. Electrolysis was carried out by means of a fine electrode one millimètre in diameter, and covered with caoutchouc to within two centimètres of its extremity. This was attached to the negative pole, and after cocaineization, currents of from two to three milliampères were tolerated. Seventeen applications were made at intervals of from a week to a fortnight. The fistula was then closed, and at the end of ten months still continued so.

Dundas Grant.

Kopfstein (Prague).—*On a Lateral Air Tumour of the Neck covered with Cylindrical Epithelium.* "Wiener Klin. Rundschau," 1895, Nos. 27 and 28.

A PATIENT, twenty-nine years old, remarked that during blowing and snuffing an elastic tumour appeared under the left half of the lower jaw. On pressure the tumour disappeared. The tumour enlarged while the patient was at work, and disappeared during rest. Operation was performed consisting of the extirpation of a sac with thin blue walls. When it was opened air was discharged. The extirpated tumour was eight centimètres long. The internal surface was covered with ciliated epithelium. The author believes that it originated from an incompletely closed branchial cyst. *Michael.*

E A R S.

Lester, J. C.—*An Electric Pressure Sound for the Direct Vibration of the Membrana Tympani.* "New York Med. Journ.," June 8, 1895.

A DESCRIPTION (illustrated) of the instrument and motor vibrations of from five hundred to fifteen hundred a minute, and with an amplitude of from zero to half an inch, are obtainable. The motor is held in one hand and the sound in the other. It is easy of application, causes little reaction, and is of especial value in sclerotic and atrophic conditions. *R. Lake.*

Marple, W. B.—*Successful Mechanical Treatment of some unusual Aural Conditions.* "New York Med. Journ.," June 1, 1895.

THE writer refers to Blake's method by a strip of rubber to exert pressure on the malleus. The first patient, whose hearing distance in the right ear was one foot, complained of vertigo in that ear when the head was tilted to that side. Blake's rubber strip was applied eventually with excellent results, but subsequently exchanged for a disc of paper, which completed a cure. In the two remaining cases a particular note caused a loud noise in the ear; one was cured with the spring alone, and the other by the spring followed by the disc. An explanation of these buzzings is afforded by Helmholtz, who attributes it to the cog-like articulation between the incus and malleus, the former, in any excessive outward movement, leaving the latter behind, and being struck by the returning hammer. The writer attributes an undue prominence of these sounds to a laxness of the ligaments of the articulation, the spring tightening up the joint, and the vertigo in the first case to an abnormal laxness of the articulations in the chain of ossicles. *R. Lake.*

Hefleblower, E. C.—*Clonic Spasm of the Tensor Tympani.* "New York Med. Journ.," March 16, 1895.

PREVIOUSLY reported cases are quoted by the author, who then adds the two following cases from his own practice:—(1) A woman, thirty-five years of age, had suffered from a clicking noise in the ears in conjunction with a twitching of the muscles of the throat. Exertion and fright made it worse; rest and quiet relieved it. In the left ear a perceptible indrawing of the membrane was seen at every click. The palate was affected, but not the larynx. The patient's father was insane. In the second, a man of mature age, the noise was louder; heard at two feet away; both the palate and larynx were affected. This patient was nearly insane. The author draws attention to the question of mental affections in relation to the disorder under consideration. He next reviews most minutely the