During this period many polypi were removed from the nose, and the antrum opened through the inferior meatus and the last alveolus. The maxillary protrusion constantly became larger. A radical operation was done by Dr. Brown. The outer wall of the antrum was largely destroyed. A large growth filled the antrum, and was shelled out without much difficulty. Cavity was curetted and packed with iodoform gauze. Microscopical examination showed the growth to be a myxo-fibroma, with a few suspicious cells, possibly sarcomatous. The wound in the maxilla closed, but the appearance was not satisfactory.

Further report: A second section of the tumour was found to contain spindle-cells, making the diagnosis that of sarcoma. As the protrusion of adventitious tissue from the jaw rapidly increased, pressing out the cheek very noticeably, the reporter, on June 26, removed the greater part of the affected maxilla. There was much hamorrhage, but the patient rallied well.

Abstracts.

PHARYNX.

Barwell, **Harold S**. (London). — A Note of Hypo-pharyngoscopy. "Lancet," August 17, 1907.

The author describes the method devised by von Eicken, of Freiburg, by inserting a stout laryngeal probe between the vocal cords which can be drawn forward so as to expose new growths in the post-cricoid region.

StClair Thomson.

Niles, R. M., M.D.—Chronic Pharyngitis. "New York Medical Record," October 5, 1907.

The treatment of pharyngitis should aim to correct errors in hygiene and to prescribe constitutional remedies for existing dyscrasias. The red and yellow iodides of mercury seem, at times, to be beneficial, even in cases presenting no specific history.

Local treatment is of the greatest importance. One must eliminate the ætiological factors if possible, or at least mitigate their deleterious effects, and treat the nasal disease which so often coexists with assiduity.

For cleansing purposes the author uses:

Aq. ferv. q.s. ad 3iv

The strength of the formula given may be diminished, if desired, by
the addition of water. The specific gravity of watery solutions used in

the nose should approximate 1020. Aqueous solutions may be lowered in sp. gr. by adding water, or raised by the addition of glycerine or sodium chloride.

After cleansing the nares and pharynx, applications of iodine and glycerine (gr. v-xxx to 5j), tannic acid and glycerine, resorcin, etc., may be employed. In general the author thinks the medicaments used are too weak, although in certain cases even very mild applications aggravate the condition. It is wise, therefore, in most cases to begin with the milder applications, gradually increasing their strength as the exigencies of the case demand.

In follicular pharyngitis strong solutions of silver nitrate applied

after cocainising the pharyngeal mucosa are used.

As there is an abnormal blood supply with resultant disturbance in nutritive equilibrium, measures which tend to overcome relaxed vascular walls and promote normal tissue metabolism should, and do, prove most advantageous.

Local applications of capsicum act with great celerity in atonic and

in ulcerated pharyngitis.

Vinegar of capsicum (10 per cent. to 20 per cent.) is applied to relaxed conditions. The oleoresin (1 per cent. to 5 per cent.) in cod-liver oil is preferable in atrophic and follicular cases. Apply with a swab.

Under the capsicum treatment nodules disappear, atrophic mucosæ become better nourished, passive congestion is relieved, and normal secretion is re-established.

W. Lauzun-Brown.

Berard, M. L.—Congestion of the Thyroid Gland. "Gaz. des Hôpit.," November 27, 1907.

According to the author reflex vaso-motor disturbances having their origin in the sexual organs play an important $r\hat{o}le$ in the ætiology of this affection. Mention is made of the congestion occurring before the first menstruation and during the period, especially when associated with dysmenorrhea in chlorotic girls. Sexual excitement is capable of inducing it; the glands are constantly enlarged during the æstrual period in animals. Enlargement during pregnancy was observed in forty-five out of fifty cases by Wolfang Freund. The strain attendant on labour accentuates the condition. Tarnier has observed cases of this nature where swelling of the gland has almost reached the point of suffocation. Reflex congestions take place at the menopause, and are at this time sometimes premonitory of thyroid carcinoma.

In men swelling of the gland may attend puberty; masturbation is cited as a cause at this period. Passive congestion is induced by tight clothing about the neck or by a constricted position of the latter, as in bending forward the head for lengthened periods in certain occupations. Overstrain is an important ætiological factor, as seen in untrained runners and gymnasts. It has also been noticed in singers and commanding officers and during fits of coughing and vomiting.

In infancy the condition is met with as a form of "congenital goitre," also as a result of prolonged labour, face presentations, and pressure on the cord. The writer states that the gland is much more prone to congestion under all circumstances and ages in countries where goitre is endemic, owing to instability of functional equilibrium.

H. Clayton Fox.