

The ophthalmalmo-reaction test was practised thirteen times; a positive result followed four times only, especially so in two admittedly tuberculous.

In short, as a result of the tuberculin tests only five out of twenty-two children could be considered free from tubercle, yet the majority of them enjoyed good health. The tonsils were inoculated into guinea-pigs, but many of them died too rapidly to afford any information as to tuberculosis. In seven where an autopsy had been made at the correct period no tubercular lesion was found; amongst these were two which had been inoculated with tissue from tubercular children. As regards inoculation with adenoid vegetations, in one case only was a pig tuberculised, and in this instance the vegetations belonged to a child not clinically tuberculous. The tonsils were histologically examined in sixteen cases and adenoids in fifteen; no tubercular focus was observed. Multiple sections were made from the vegetations which had tuberculised the guinea-pig, but revealed nothing. Preparations stained by Ziehl's method gave no indications of Koch's bacillus. Tuberculisation had no doubt been determined by bacilli, existing either on the surface or deep in the naso-pharyngeal mucosa, but which in any case had not had time to set up specific lesions there. The writers conclude as a result of these researches that proof is wanting that the pharyngeal lymphoid tissue serves as a portal for bacillary infection. The observations, besides, go to show the existence of cervical and mediastinal non-tubercular adenopathies amongst the subjects of adenoid vegetations and hypertrophied tonsils.

H. Clayton Fox.

NOSE.

Mermod (Lausanne).—*Unilateral Ozæna and Subcutaneous Resection of the Septum.* "Annales des Mal. de l'Oreille, du Larynx, du Nez, et du Pharynx," August, 1908.

According to the author's experience, unilateral ozæna does not occur when the nasal fossæ are of equal calibre. It is invariably associated with deviation of the septum, and the wider fossa is the seat of the malady. In a typical case of the kind, one finds the narrower fossa in a state of catarrhal rhinitis, the result of mechanical obstruction, while on the wider side there are crusts, fætor and dryness, the inferior turbinated body is atrophied and the middle one either hypertrophied or the reverse. Difficulty in breathing is experienced equally on both sides, in the one case arising from encroachment of the septum and catarrh, and in the other from crusting and dryness. In dealing with these cases, the writer has obtained the most happy results from submucous resection; it is necessary to avoid a perforation, which is not difficult, for in the cases in question the septal mucosa is never so atrophied as that of the turbinated bodies. Details of four cases instancing the success of the operation are given. In all the catarrh on the narrowed side was cured, whilst the crusting, discharge, fætor and dryness on the ozænatous side ceased, the mucosa became more or less moist and lavages could be dispensed with.

H. Clayton Fox.

Grace, R.—*The Treatment of Hay Fever.* "Therapeutic Gazette," August 15, 1908.

The author considers nasal operation leaving scar tissue liable to be dangerous, and advocates painting the congested and sensitive area of

the nasal mucous membrane with a 2 per cent. solution of "Nargol," a silver nucleide. The treatment is continued every third day until the membrane "assumes a normal appearance and the sensitiveness disappears." Cases are given. Macleod Yearsley.

NASO-PHARYNX.

King, Gordon.—*Report of Cases.* "New Orleans Med. and Surg. Journ.," September, 1908.

The cases reported are: (1) A case of fibroma of the naso-pharynx removed by avulsion: A boy, aged nine, operated upon for adenoids two years previously, the operation being followed by severe hæmorrhage. The fibroma was sessile, attached to the vault of the pharynx and the right choanal margin. Removal by avulsion was attended by severe hæmorrhage and collapse. (2) Sarcoma of the mastoid following operation for mastoiditis: A woman, aged sixty-eight, with old suppuration. The mastoid wound failed to heal, and a second operation for great pain and swelling revealed a mass of new tissue encroaching on the meninges. This proved to be a round-celled sarcoma. Patient died soon after from rapid recurrence. (3) Purulent meningitis of otitic origin, *via* Fallopian canal and internal auditory meatus: A negro, aged twenty-three. (4) Complete aphasia and right hemiplegia complicating acute otitis media: relieved by cerebral exploration. A girl, aged two and a half; suppuration followed measles. Left pain was treated by free myringotomy. One week later, sudden aphasia and paralysis of right arm and leg. Operation refused for a week. Radical mastoid, cranial cavity explored; brain was congested, but no abscess found. Patient recovered completely.

Macleod Yearsley.

LARYNX.

Iwanoff, A. (Moscow).—*The Laryngeal Affections met with in Syringobulbia.* "Zeitschrift. f. Laryngol.," vol. i, Part I.

The author has observed certain characteristics of the laryngeal paralysis occurring in syringobulbia, which he regards as pathognomonic of the disease. Of twenty-eight cases in which the larynx was affected, seven showed typical right or left recurrent paralysis. In the remaining twenty-one the condition was quite different, the paralysis being incomplete on one or both sides of the larynx, and of such a kind as to show a departure from Semon's rule that the *musc. posticus* is first involved. In all of these cases on one side at least some other muscle (most often the *thyro-arytænoideus internus* or the *arytænoideus transversus*) was paralysed, while the *crico-arytænoideus posticus* remained intact. It is this atypical mode of onset of the paralysis in the course of which individual muscles are affected which the author considers characteristic of the disease.

The laryngeal conditions found in syringobulbia differ from those occurring in syringomyelia. In the latter the paralysis is usually unilateral and complete (or sometimes affecting the *musc. posticus* alone), while in syringobulbia the paralysis is bilateral, and shows on one side at least the peculiar features mentioned above. In *tabes*