

MOUTH, &c.

Dixon, F. A.—*Further Note on the Course of the Taste Fibres.* “Edinburgh Med. Journ.,” June, 1897.

WHEN he wrote his article “On the Course of the Taste Fibres” in the April number of the “Edinburgh Medical Journal” (see JOURNAL OF LARYNGOLOGY), the author had not read Prof. Krause’s work, “Die Neuralgie des Trigemini.” After discussing the difficulties presented by some of the cases, he concludes:— “Prof. Krause’s observations are compatible with the theory that the seventh and ninth nerves are the nerves of taste, and with no other at present put forward. “Since this is so, the theory that these are the true paths for taste impulses is supported by anatomical, embryological, and experimental evidence.”

Arthur J. Hutchison.

NOSE AND NASO-PHARYNX, &c.

Folkes, H. M.—*Worms in the Nostrils.* “Med. Record,” May 8, 1897.

THE patient was a male negro of deficient mental capacity, who came complaining of nose-bleeding and pains in the head. The right side of the head was much swollen, and in the nostril of that side a mass of “screw worms as large as a pecan” was seen. Forty-one were removed and the nostril irrigated with thymol solution. As there were obviously worms in the antrum, operation was considered, but an alcoholic solution of chloroform was first tried. Next morning the swelling was much gone down, and twenty-two more had been expelled. Eventually in five days one hundred and thirty-one worms were removed, none less than ten millimètres long, and the boy was cured.

R. Lake.

Heubner.—*Meningo-coccus Intracellularis in Pus from the Spine and in the Nasal Secretion of a Case of Epidemic Cerebro-Spinal Meningitis.* Verein für Innere Med., March 1, 1897. “Deutsche Med. Woch.,” April 29, 1897.

LAST year in the same society Heubner reported nine cases, Von Leyden three, A. Fraenkel one, and Fürbringer five of epidemic cerebro-spinal meningitis, in all of which bacteriological investigation revealed the presence of the intracellular diplococcus. On February 15th of this year a young man was received into the first medical clinic suffering from the typical signs of meningitis. Lumbar puncture was performed, and forty cubic centimètres of thin, purulent fluid flowed out; this contained in large quantities the typical intracellular meningo-coccus.

After touching on some other interesting points in the case, Heubner continued: Even during life this typical diplococcus was to be found in quantities in the nasal secretion, where this was purely purulent. (Control examinations of the nasal secretion from patients in the next beds revealed no such coccus.)

Jaeger and Scherer were the first to discover the diplococcus in the nasal secretion and on pocket handkerchiefs of meningitis patients (even after six weeks), and