

upon the tube. If the tube was expelled the patient might die before it could be re-inserted. Cures reported of laryngeal paralysis might be cures of only ankylosis.

---

## Abstracts.

### PHARYNX.

**Goodale, J. L.**—*The Local Treatment of Acute Inflammations of the Throat from the Standpoint of Pathology.* "Boston Med. and Surg. Journ.," June 25, 1908.

In this paper are presented the results of an examination into the effects of local applications upon infectious processes of the tonsils and pharynx. The histological phenomena of acute tonsillitis are reviewed, and forty cases examined and treated by various antiseptic preparations considered. The results are thus summarised: (1) Acute tonsillitis in the early stage before the appearance of white spots or systemic depression was apparently aborted in some instances by local antiseptics. (2) In some cases acute tonsillitis, when seen early, was apparently checked by local antiseptics, but inflammation appeared in neighbouring organs and seemed to be of protracted duration. (3) Where systemic disturbance exists and white spots are present in the lacunæ, no checking of the inflammatory process was observed from the application of antiseptics. (4) The introduction of antiseptics into the crypts was followed by a heightening of the local inflammatory process, and in some cases by increased systemic absorption. The author also gives results of a series of experiments as to the possibility of sterilising the mouth for a given micro-organism. Twenty cases of diphtheria were taken, and the antiseptics used were peroxide of hydrogen, carbolic acid, and creolin. These experiments proved that it is possible to completely remove a given micro-organism from the mouth by chemical antiseptics.

*Macleod Yearsley.*

---

### NOSE.

**Sluder, G.**—*The Rôle of the Spheno-palatine Ganglion in Nasal Headaches.* "New York Med. Journ.," May 23, 1908.

Attention is called to a type of headache which is irregular in the time of appearance and irregular in the part of the head involved. Sometimes the pain may be referred to the eyes, nose, teeth, or jaw. Often these irregular pains have followed some high-grade inflammatory troubles in the posterior ethmoidal and sphenoidal sinuses. Sluder offers the ingenious explanation that the spheno-palatine (Meckel's) ganglion has been involved in the inflammatory process. In some cases the use of cocaine just over the ganglion relieves the symptoms immediately. The application of silver or formaldehyde in weak solutions either cured or helped the pain. None of the cases were of sufficient severity to warrant operation.

*Macleod Yearsley.*