

Dr. ANDREW WYLIE showed a *Case of Accessory Tragus*.

Dr. DAN MCKENZIE made a communication with reference to the case of epithelioma of the posterior surface of the auricle in which the auricle was entirely removed.

Dr. Dan McKenzie intimated that a recurrence set in on the lower lip of the meatus about three months after the operation and was advancing rapidly.

The specimen was shown at a recent meeting of the Society.

The PRESIDENT showed a *Forceps* which he had designed for removing the anterior edge of the vomer near where it joins the floor of the nose. He also showed two *Elevators* for raising the mucous membrane of the opposite side of the nose through the window in the quadrilateral cartilage.

Dr. ANDREW WYLIE showed some *Nasal Guards* for resection operations which he had designed to obviate the use of the speculum.

Abstracts.

PHARYNX AND NASO-PHARYNX.

Baumann, Walther (Breslau).—*The Pharyngeal Reflex*. "Münc. med. Woch.," March 27, 1906.

In seven hundred cases systematically examined with regard to this, complete absence was only found in three cases of hysteria, bulbar paralysis, and arterial sclerosis respectively. The reflex was frequently considerably lowered in hysterical subjects and occasionally lowered in epileptics. For the observation of the pharyngeal reflex it is not necessary to cause a vomiting movement: a distinctly visible contraction of the pharyngeal muscles is sufficient. The reflex is more frequently increased in children than in grown people. Occasionally an inhibition of the reflex is produced by psychical influences. In chronic pharyngeal catarrh an increase of the reflex is not usually present, and in the acute forms there is no regular rule. In cases of hypertrophy of the tonsils without inflammatory swelling a lowering of the reflex is in general very uncommon.

Dundas Grant.

Jager, Karl.—*Tumour of the Left Half of the Face originating in the Roof of the Pharynx*. "Münc. med. Woch.," May 15, 1906.

The description of the case is illustrated by a picture representing the horrible disfigurement which can be produced by the so-called malignant polypus, in this case a soft vascular sarcoma growing from the periosteum of the sphenoid and extending into the cavities of the left orbit, nose, and pharynx. The smallest incision gave rise to severe bleeding for half an hour. The case had no doubt reached a stage at which it was inoperable.

Dundas Grant.