paralysis of the left vocal cord. After healing there was an ugly cicatrix on the side of the neck, pressure on which or turning the head to the right produced attacks of spasmodic cough. In both cases electrical treatment was tried, but the patients disappeared before any result was attained. *James Donelan.*

ŒSOPHAGUS.

Jackson, Chevalier.—*Œsophagoscopic Removal of Open Safety-Pins by a New Method.* "Laryngoscope," April, 1910, p. 446.

The method is devised for the removal of safty-pins lodged in the œsophagus point upward. A special forceps having sharp pin-like points seizes the safety-pin by the ring in its centre; the forceps and pin are pushed onward into the stomach, in the free cavity of which the pin is easily and safety turned so that the point is now downward. If the pin is small it can be withdrawn through the tube; if large, the forceps carrying the pin and the œsophagoscope are withdrawn together.

Dan McKenzie.

EAR.

Rolleston, H. D.—*Rheumatic Nodules on the External Ears.* "Brit. Med. Journ.," August 6, 1910.

Man, aged twenty-one, who developed tophi, during an attack of acute rheumatism, which diminished in size during convalescence.

Macleod Yearsley.

Schwarz, Gottwald.—*On the Application of the Röntgen Rays to Otology.* "Monats. f. Ohrenheilk.," Year 44, No. 6.

The apparatus for this use, says the author, must be of the highest order so as to minimise as far as possible the many difficulties which this form of investigation presents. It must be furnished with means for taking instantaneous pictures, and the best tubes are those of medium hardness. It is claimed that the following data can be obtained from this means:

The character of the bone (diploëtic, pneumatic, sclerotic), distribution and size of the cells, thickness of the cortex, size and thickness of the labyrinth capsule, size and shape of the mastoid process, of the pyramid, of the ridge of bone separating the two cranial fossæ, of the tympanic ring, of the mandibular fossa, and of the tegmen antri, size and position of the outer and inner meatus, position and depth of the sigmoid sinus; position, and frequently form and size, of the vestibule with the ampullæ. Position of the cochlea. Also often, and in children always, one can detect the antrum (its position and form), the attic (though this seldom), the cochlea, the canals, and the jugular bulb.

Herschel has also utilised the rays to control the decalcification of bone in the preparation of microscopical specimens, which is of course less detrimental than testing the condition with a needle.

Foreign bodies, such as bullets, can of course be localised, but for this the screen is more convenient.

Fractures of the base of the skull may also be detected, though this the author admits may be difficult.

In both acute and chronic inflammation of the middle ear the rays afford great diagnostic help. Pictures are taken in two positions—the one with the head lying on the side and the ear on the plate, whilst the tube is placed vertically over the contra-lateral parietal eminence. The

other picture is taken from behind, with the frontal eminences applied to the plate, the chin pressed down on the chest, and the patient lying on his stomach. By this latter means a simultaneous photograph can be obtained of both ears, a point of considerable advantage.

Blurred indistinct shadows of one mastoid process in connection with chronic middle-ear disease indicate otosclerosis.

One-sided acute middle-ear catarrh gives a hazy picture, the cellular structure of the bone being almost indiscernible. Such haziness disappears after the healing of the acute condition in a fairly short time. Acute mastoiditis affords a similar and indistinguishable picture. As regards the prognosis in acute middle-ear disease, it is of the utmost importance to know if the mastoid is markedly pneumatic, as in these cases the bone is very apt to become affected.

Anatomical data, as referred to above, may also be of great help to the less experienced as an indication of what may be expected in the operation. The extent of the invasion of destructive growths may also be determined.

As regards the therapeutic action of the X-rays in otological work, Schwarz sounds a note of serious warning as to their possible harmful effects, and the great care with which, therefore, they should be applied for this purpose. This particular branch is still in its infancy, but the author has apparently seen beneficial effects from the use of Röntgen rays in cases of chronic eczema, lupus, scrophulo-derma, epithelioma, one case of "otitis sclerosa," and in one case of chronic otitis media.

A bibliography concludes the article, which is rather disappointing, and would perhaps have been of more value had it been postponed till more practical clinical data could have been described.

Alex. R. Tweedie.

REVIEW.

The Ear and its Diseases. By ALBERT A. GRAY, M.D., Laureate of the Lenval Prize, International Medical Congress, 1909. Fellow of the Royal Society of Edinburgh, Surgeon for Diseases of the Ear, Victoria Infirmary, Glasgow, Surgeon for Diseases of the Ear and Throat, Glasgow Cancer Hospital, author of "The Labyrinth of Animals." With stereoscope and 123 illustrations, of which 37 are stereoscopic. London: Baillière, Tindall & Cox, 1910.

Similar as text-books of the usual size on diseases of the ear must necessarily be, it would be most surprising if one from the pen of Dr. Albert Gray failed to present features peculiarly its own. Dr. Gray's name is now one of world-wide celebrity, mainly on account of his remarkable contributions to the study of the structure of the internal ear, not merely in man, but in many of the lower animals. He has also added what we consider a most elucidating analysis of the methods of conveyance of sound to the internal ear, explaining better than any other writer the reason for the retention of hearing for high-pitched tones, in spite of the presence of a considerable amount of disease of the conducting apparatus. His use of aniline oil to assist the penetration of the tissues by local anæsthetics is, in spite of its occasional untoward effects, an idea which reflects the greatest credit on its ingenious deviser. Dr. Gray's work has been crowned by the awarders of the Lenval Prize for the greatest additions to the means of benefiting the deaf.

The work now before us comes with a great reputation to maintain, and it does so most worthily. Constructed on the model of the necessarily