

E A R.

Lees, D. B.—*Two Cases of Abscess in the Temporo sphenoidal Lobe presenting no Lesion in the Ear.* "Lancet," May 3, 1902.

Abscess of the temporal lobe of the brain is so commonly consecutive to suppuration in the middle ear that it is desirable to record instances where no ear-lesion was present. In the following cases there was necrosis of a small portion of the petrous bone, but the middle ear appeared to be perfectly healthy. Septic organisms may have been conveyed to the petrous bone and to the brain from a transient otitis externa, which is not uncommon in children. Mr. C. Mansell Moullin described a case at a meeting of the Clinical Society of London,¹ in which an abscess was found in the temporal lobe, although there was "no sign of middle-ear disease."

CASE 1.—A girl, aged six years, was admitted into the Hospital for Sick Children, Great Ormond Street, on November 14, 1901, under the care of Dr. D. B. Lees. For two months before admission she had suffered from frontal headache and earache and for the previous month from vomiting. On admission her attitude was one of cerebral irritation, with evidence of marked photophobia. She complained of severe intermittent pain in the right frontal region. No paralysis or rigidity was present, but there was optic neuritis on each side, which was more advanced on the right side. Percussion of the head elicited tenderness only over the right side of the forehead. The tympanic membranes were normal, and no discharge from the ear was found. The child's condition remained about the same till the morning of November 25, when she died suddenly.

Necropsy.—At the post-mortem examination an abscess containing about 2 ounces of greenish inodorous pus was found in the right temporo-sphenoidal lobe, with rough walls of some thickness and consistence. On the dura mater, facing its point of nearest approximation to the surface and overlying the external auditory meatus about $\frac{1}{2}$ inch from the tympanum, was a hiatus $\frac{1}{4}$ inch in diameter, with discoloured margin, leading to a necrotic depression in the bone. On chiselling away the latter the underlying lining membrane of the meatus was found to be normal. The dura mater over the middle ear was normal, and the cavity of the latter and the mastoid cells contained only a trace of clear mucus, the walls and ossicles showing no change. The organs in other parts were healthy. A pure culture of the *Streptococcus pyogenes* was obtained from the pus.

CASE 2.—A girl, aged one year and nine months, was admitted into Dr. Lees' ward on July 16, 1896. Three months before admission she had suffered from vomiting, and "used to put her hand to her head and cry out." For three weeks before admission she had lost the use of her limbs, a condition which was ushered in by a fit. The child was drowsy, with bulging fontanelle, and presented a left-sided hemiplegia. A double internal squint subsequently appeared, but no optic neuritis. Death occurred on August 16.

Necropsy.—The post-mortem examination disclosed an abscess of the size of a hen's egg in the right temporo-sphenoidal lobe, with tough walls and containing thick greenish pus. Some amount of basic meningitis was also present. The brain and membranes were adherent to the right great wing of the sphenoid, and the right petrous bone showed a small patch of disease of about the size of a threepenny-piece above the tympanum. The middle ear on this side was healthy

¹ *Transactions of the Clinical Society of London*, vol. xxvii., 1894, p. 124.

and the membrana tympani was clear and thin. Otherwise the body showed no abnormality.

Remarks by Dr. Lees.—In each of these two cases an abscess in the right temporo-sphenoidal lobe apparently resulted from necrosis of a small part of the petrous bone, without any affection of the tympanic cavity or mastoid cells. It is, however, to be regretted that the temporal lobe and petrous bone had not been removed together and placed in formalin before it was attempted to trace the path of the suppurative infection. In the case first narrated the necrosed part of the petrous bone lay over the external auditory meatus, and in the earlier case it lay over the tympanum. In both cases the underlying mucous membrane was healthy, and it seemed probable that the bone was the primary seat of disease. The cases prove that necrosis of the petrous bone and temporo-sphenoidal abscess may exist when there is no otorrhœa and the tympanic membranes are normal—a fact of great importance in diagnosis.

StClair Thomson.

REVIEW.

The Practical Medicine Series of Year-Books, comprising Ten Volumes on the Year's Progress in Medicine and Surgery. Issued monthly.

Under the editorial charge of GUSTAVUS P. HEAD, M.D., Professor of Laryngology and Rhinology, Chicago, Post-graduate Medical School. The Year-Book Publishers, Chicago, 1901. Price \$1.50. Pp. 346.

This volume (No. III.) comprises a résumé of the year's work in ophthalmology, otology, laryngology, and rhinology, the three latter being compiled by Drs. A. H. Andrews and T. M. Hardie, and gives a very fairly comprehensive review of the work done in the specialities. But the section on otology especially has been very carelessly put together, the most obvious errors being allowed to appear—as, for instance, on p. 139, the sinus of the external meatus is said to lie in front of the drum, and the upper posterior quadrant of the tympanic membrane is asserted to be called "Shrapnell's membrane" on p. 181. It does not matter materially whether these errors were perpetrated in the original articles or not, for if they were such ignorance should have insured their exclusion. We cannot insist too strongly on the responsibility that rests in the hands of editors; they are not responsible, it is true, for opinions, but for accuracy they are. The laryngological and rhinological section is much more carefully rendered, and will be of extreme value to all writers on the subject.

From a British point, the inclusion of ophthalmic surgery in the volume is not an advantage, but we shall look for ensuing editions of this work with pleasurable anticipation.

APPOINTMENTS.

GLEGG, WILFRID, M.D., C.M., M.R.C.P. Edin., has been appointed Honorary Assistant Surgeon to the Birmingham and Midland Ear and Throat Hospital.

LAMB, WILLIAM, M.D., C.M. Edin., M.R.C.P. Lond., has been appointed Honorary Surgeon to the Birmingham and Midland Ear and Throat Hospital.