

growth had an irregularly serrated edge, like the comb of a cock. Pieces crumbled away from time to time, showing reddened mucous membrane beneath.

William Lamb.

Shirley, E. L.—*A Case of Epithelioma of the Larynx. Laryngectomy and Partial Pharyngectomy. Death on the Eleventh Day from Exhaustion.* "N. Y. Med. Journ.," July 16, 1898.

DETAILS of the operation are given; and a summary of the subsequent history of the case would indicate that exhaustion was the chief factor in the fatal issue, and not pneumonia or septicæmia—the usual sequelæ of such operations when not followed by immediate death from shock or hæmorrhage.

Toeplitz, Max.—*Mycosis Pharyngis Leptotricia.* "N. Y. Med. Journ.," June 25, 1898.

THE writer gives the varieties, clinical appearances, and differential diagnosis of this affection, and lays some stress on the fact that it may readily follow an acute follicular tonsillitis, or diphtheria. Many remedies have been used with varying success, and, in the writer's hands, the sharp spoon and galvano-cautery were very effective. An extensive bibliography of the subject is appended.

Wright, Jonathan.—*Some Critical and Desultory Remarks on Recent Laryngological Literature.* "N. Y. Med. Journ.," June 4, 1898.

THE writer supplies a pretty exhaustive article, giving a *résumé* of the more important papers on the subjects.

THYROID.

Goris.—*Operation in a Peritracheal and Retrosternal Goître in Extremes. Cure.* "Ann. de la Soc. Belge de Chirurgie," Aug. 15, 1898.

THE case was that of a girl, nineteen years of age, who had had a goître since she was four years old. The tumour was enormous, and before operation she was nearly dead, the trachea being flattened. Tracheotomy and removal of the growth, leaving only a piece the size of a plum, saved her.

B. J. Baron.

Kocher, Theodor (Bern).—*A New Series of Six Hundred Operations for Goître.* "Correspondenz-blatt für Schweizer Aerzte," 1898, No. 18.

THIS series includes the operations for goître undertaken in Kocher's clinique during the last three and a half years, and follows a series of one thousand operations published by him in 1895. Thyroid treatment has not accomplished more than iodine treatment. He finds that ninety per cent of goîtres are so far improved by medical treatment that operation is not required.

Indications for operation are where medical treatment has proved useless; where there are developments of large isolated nodules, in every form of cystic formation; and where there is the slightest suspicion of malignant disease. The chief indication is difficulty in breathing; where this occurs operation is the only treatment. For the past two years the author has used, almost exclusively, one per cent. cocaine, and prefers it to general anaesthesia in complicated cases. In Basedow's disease, and where there is tracheal stenosis, breathing is quieter, venous hæmorrhage is less, and patient can phonate, which lessens the risk of the recurrent nerve being injured; otherwise, the operative procedure is the same.

T T

He draws special attention to a condition which he terms "thyreoptosis." The larynx is comparatively low, and only the upper tracheal ring covered by the isthmus is palpable over the incisura sterni. The whole lower corner of the thyroid lies within the thorax; when this enlarges, a struma profunda or intrathoracica, without enlargement in the neck, develops. It is characterized by dulness over the manubrium sterni and first intercostal spaces, and must be looked for in unexplained asthmatic attacks or dyspnoea where examination of the larynx and chest is negative. If small, there may be no dulness, and, owing to its position, severe symptoms may be caused. An attempt may be made to map out the thyroid lobes by palpation; when this can be done on one side only, one may be nearly certain that the lower corner is in the thorax. If it is not fixed, it may be protruded on coughing. There is also a form of thyreoptosis where the position of the larynx is normal; where the thyroid is enlarged and movable on deep inspiration, certain parts may be drawn into the thorax. Development of even small nodules cause dyspnoea. Operation should be done before adhesions form.

Amongst five hundred and fifty-six cases of a colloid and cystic nature, only one death due to chloroform occurred. The author considers that, with cocaine and aseptic treatment, operation is absolutely safe. Many of these cases were in weak individuals with marked respiratory and circulatory disturbance.

Six out of eighteen malignant cases died, due to severe, complicated resections, which involved important structures.

Two out of fifteen cases of Basedow's disease died—one due to pneumonia, the other to accelerated action of the heart.

Two deaths occurred in eleven cases of strumitis—one due to tetany, the other to suppuration in a case which had been tapped elsewhere. *Guild.*

E A R .

Starr, F. N. G. (Toronto).—*Epithelioma of the External Ear.* "Canadian Journ. of Med. Surg.," July, 1898.

THE history of two cases are given. First: Male, aged fifty-eight. The cancer had formed in the middle of the outer edge of the helix; it was thickened and ulcerated, presenting everted edges. There was no pain. The operation was V-shaped, pointing down to the bottom of the concha. Two silkworm gut sutures drew the deep cartilages together, and a continuous horsehair suture closed the wound. Union was rapid. One year later there was no recurrence. Second: This case was under the care of Mr. J. H. Cameron; Dr. Starr assisted in the operation. It occurred a week after the first case. In this one, the growth affected the base of the lobule, extending into the fossa of the antihelix, and involving the anti-tragus. This also was unattended by pain. It was removed, and the lobule sutured to the remaining part of the prima. A good recovery ensued, but the case was not traced any farther. *Price Brown.*

Stillson, J. O. — *Mastoidectomy involving Lateral Sinus Complications.* "Laryngoscope," June, 1898.

In this interesting paper the writer records the histories of three cases, in two of which operation followed by recovery took place. In the third operation was refused, and death took place.

In the first case there had been repeated aural abscesses. Two mastoid opera-