

ŒSOPHAGUS.

Butlin, H. T.—*On a Second Case of Removal of a Pressure Pouch of the Œsophagus.*
 "Brit. Med. Journ.," Jan. 1, 1898.

IN this interesting communication the author relates the histories of six cases of pressure pouches of the œsophagus which he has seen in his practice. In two of the cases the author removed the pouch with satisfactory results. He believes that the rarity of this condition has been greatly exaggerated. He remarks also that the true pressure pouch is practically always situated at the back of the junction of the pharynx with the œsophagus, and that it opens into the gullet by a longitudinal opening in the middle line about an inch in length. It is more commonly found in males than in females. All of the author's patients were men, and in every one of them the symptoms of the pouch were first noticed after forty years of age. The one constant symptom in every case is the return of fragments of undigested food many hours after the food has been taken. The fragments may be coughed or choked up, and occasionally liquids taken at night will run out, and make the patient cough when he changes his position during the night. Pressure on the side of the neck in the posterior triangle causes fragments of food and liquid to return into the mouth. A bougie is arrested at a distance of about nine inches from the teeth. As a rule it passes into the pouch, and its end may be made to project so that it can be felt and seen in the side of the neck (almost always the left side) behind the sterno-mastoid muscle. Wasting and loss of weight are rarely observed until the disease is very far advanced. The course of the disease is very slow. In all cases in which operation has been performed the relief afforded has been complete and permanent. The author refers to various cases which have been operated upon, and to the method of operation. *W. Milligan.*

THYROID, &c.

Bérard.—*Thyroid Fever after Operations on Goitre.* "Presse Méd.," Dec. 29, 1897.

IN order to test the hypothesis that the rise of temperature often seen after operations on goitre was due to absorption of the secretion of the gland, the author injected rabbits with fresh extracts of goitre removed by operation. In every instance a rise of temperature amounting to 1° or 1.5° Centigrade was noted. In some instances tetany and contractures occurred, and lasted for two or three days. Extracts of normal thyroid had a much more transitory action.

Ernest Waggett.

Doyen.—*Traitement Chirurgical du Goitre Exophtalmique.* "Presse Méd.,"
 Oct. 27, 1897.

A COMMUNICATION made before the French Surgical Congress, in which the author recommends thyroidectomy, which, in his hands, has given complete cure in four cases operated upon. *Ernest Waggett.*