

affections of the larynx in acute and chronic general diseases, lupus, tuberculosis and syphilis of the organ, are treated satisfactorily. The same may be said of benign and malignant neoplasms, and of the appendix upon nervous diseases of the larynx. The *technique* and the description of the instruments are referred to in the different chapters in reference to any operation which is mentioned. It would be more practical to include them in a special chapter, or, as is done in some other books, to collect them in the chapter upon neoplasms. *Michael.*

Obituary.

JULIUS HEINRICH SOMMERBRODT.

JULIUS HEINRICH SOMMERBRODT died in Breslau on August 14th last. Born on February 28th, 1839, in Schweideutz, and promoted in 1861, he became assistant in the clinics of Lebert and Middeldorpf, and was created a professor in 1878. Most of his publications treat of questions of internal medicine, especially of the physiology and pathology of the circulatory apparatus, the etiology of tuberculosis ("Hat das an die Luftwege ergossene Blut aetiologische Bedeutung für die Lungenschwindsucht?"—"Virchow's Archiv," 1835), and the treatment of this disease. During recent years he recommended creosote as a necessary treatment of phthisis, and his publications have had the effect that this drug is now the most generally employed in the treatment of tuberculosis. Of special laryngological interest are some publications on laryngeal phthisis and benign neoplasms of the larynx. *Michael.*

NOTES.

LARYNGOLOGY IN BRISTOL.

A COMPLETE department for the treatment of diseases of the throat and nose has recently been created by the Governors of the Bristol General Hospital. Dr. Barclay Baron has been appointed physician to the department, having resigned his post of general physician in order to limit his work to the treatment of throat, nose and ear diseases. We understand that Dr. Baron created this department some years ago by arrangement with his colleagues, but we consider that the managers of the Bristol General Hospital have proved themselves desirous of keeping abreast of scientific progress in thus placing our specialty on a level with ophthalmic surgery, which has been a special department for a considerable time. We congratulate Dr. Baron on his appointment, and wish him all success in his special work.

IZAL.

FROM the favourable effect of izal in a case of ozæna, caught at the early stage of the process, I am induced to bring it before the notice of readers of the Journal, so that experience on the use of this new drug may be tested. In the case referred to, various local medicaments had been tried, such as canthos cotton, trichloracetic acid, galvano-cautery, etc., but without much success, and at this juncture I read the favourable notices regarding izal, and at once put it to the test in this refractory case. After three weeks' use of the drug, which I placed in the patient's hands for use, merely directing simple douching, a very favourable action on the disease was noticeable. On this slender basis I place the notice. The strength of the lotion in use is five per cent. izal. *Wm. Robertson.*

NEW PREPARATIONS.

Messrs. Allen and Hanburys.

Effervescent Granules of—

1. Phosphate of iron.
2. Ammonio-citrate of iron.
3. Sulphate of soda.
4. Citrate of potash.
5. Antipyrin.
6. Citrate of magnesia.

We have received samples of the above from this firm of pharmaceutical chemists. There are two new features about these preparations: (1) They are granulated in such a manner that the substance dissolves readily and completely on the addition of water, and without stirring, and the granules are of equal size and free from "lumpiness." (2) Each bottle is closed with a measured stopper, which contains the actual dose. This is such an effective and simple idea that the marvel is that it has not been adopted before. We are highly pleased with these preparations. They are much in advance of other effervescent preparations, and the measured stoppers are of the greatest convenience.



Witherby & Co., Printers, 226, High Holborn, London, W.C.

W W

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