

The author believes the digestive troubles are more frequently of reflex origin than occasioned by ingestion of purulent and fœtid discharge.

A. Cartaz.

Toulouse and Vaschede.—*Asymmetry of the Sense of Smell.* "Soc. de Biologie," Oct. 14, 1899.

It results from the researches of various authors that four-fifths of all subjects perceive odours better by the left than the right nostril. This difference appears to be attributable to the predominance of the action of the left cerebral hemisphere, as the olfactory nerves do not decussate.

A. Cartaz.

LARYNX.

Courtade.—*On Compression of the Trachea by an Aneurism of the Arch of the Aorta simulating Paralysis of the Abductors of the Glottis.* "Journal des Praticiens," Oct. 14, 1899.

The writer describes a case of aneurism of the aorta in a man forty-five years of age, who suffered for about five or six months from dyspnoea. During rest respiration was calm, but dyspnoea came on as soon as he walked about. The dyspnoea and the accompanying "tirage" suggested the presence of paralysis of the dilators. On laryngoscopic examination nothing of the kind was to be seen. The case was one of compression of the aorta by an aneurismal sac.

A. Cartaz.

Pitres.—*Treatment of Exophthalmic Goitre by Injections of Iodoform Ether.* Congrès Français de Médecine, Lille, August, 1899.

Many of the accidents of exophthalmic goitre are dependent upon the troubles of secretion of the thyroid gland. For improving that modified secretion, Pitres has experimented with injections of iodoform ether in the parenchymatous parts of the thyroid. Ten cubic centimetres are injected every week. The reaction is painful, but not for a long time. Little by little the nervous symptoms diminish, sleep is improved, the exophthalmos gradually disappears.

In ten cases the author has had six complete cures, and for two years there has been no recurrence.

A. Cartaz.

E A R.

Lake, R.—*Deaf-mutism: An Attempt to explain the Occasional Cure following Removal of Adenoids.* "Treatment," August 24, 1899.

Deaf-mutism is congenital or acquired. Congenital cases are sufferers from developmental errors—central, peripheral, or of the connecting structures. Acquired cases are due to (a) central lesions caused by meningitis (some are not improbably genuine cortical lesions); (b) panotitis during one of the fevers; (c) dysacusis. By this term the author proposes to designate the condition of the small class of deaf-mutes whose ears do not properly perform their function, partly because of real deafness due to Eustachian obstruction, partly because of aprosexia. These conditions, being due to adenoids, disappear when the adenoids are removed. Such deaf-mutes therefore are curable. The author describes a striking instance of such a cure.

Arthur J. Hutchison.

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