

Buchner (München).—*Is Antitoxinum a Poison Destroyer?* “Deutsche Med. Woch.,” 1894, No. 11.

BUCHNER says that the antitoxin has only a protective effect on the not yet infected body, but cannot destroy the poison which has been introduced before its application. *Michael.*

Behring (Berlin).—*Answer to Foregoing.* “Deutsche Med. Woch.,” 1894, No. 11.

BEHRING answers that his antitoxin can also destroy the poison which has been introduced into the body before its use. *Michael.*

Behring and Boer (Berlin).—*On the Necessary Quantity of Diphtheritic Antitoxin Solutions.* “Deutsche Med. Woch.,” 1894, No. 21.

POLEMICAL experimental paper concerning the preparations of Schering recommended by Ahronson. *Michael.*

Unruh.—*Treatment of Whooping Cough.* “Jahrb. für Kinderheilk.,” Band 36, Nos. 1 and 2.

MICHAEL'S nasal insufflation is recommended, combined with the internal use of antypyrim. *Michael.*

Delephine, S., and Radcliffe, F.—*The Spread of Tuberculosis through the Lymphatics.* “Med. Chronicle,” May, 1894.

THE authors, by a series of exhaustive experiments, prove well that tubercle bacilli can and do travel down lymph channels against the current of lymph, and that at all events in the guinea-pig the various regions of the body differ in the likelihood and rapidity of this occurrence. *R. Lake.*

MOUTH, PHARYNX, &C.

Paschkis (Wien).—*Antiseptic Treatment of the Mouth, and on the Antiseptic Properties of Odol.* “Therapeutische Blätter,” 1894, No. 4.

RECOMMENDATION of the medicament. *Michael.*

Szana (Temesvar).—*New Method for Disinfection of the Mouth and Pharynx.* “Pester Med. und Chir. Woch.,” 1894, No. 6.

By experiments with coloured fluids the author found that in gargling only the soft palate and the root of the tongue are touched by the fluid. Therefore he believes that gargling is ineffectual. By the application of bonbons the whole mucous membrane of the mouth and pharynx is touched by the mass. He recommends disinfecting pastilles of saccharinum and resina quaiici. He proved the disinfecting power of this application by bacteriological research of his saliva. Before the application he found culturable micro-organisms in it; after the application they had disappeared. *Michael.*

Leuhossek.—*The Histology of the Ends of the Nerve of Taste.* “Anatomische Anzeiger,” 1893, No. 4.

THE researches of the author prove that the nerves of the taste buds end free, and form a network around the taste buds. *Michael.*

Livon, Ch.—*On the Innervation of the Soft Palate.* "Marseille Medical," June 1, 1894.

THE excitation of the roots of the pneumogastric nerve determines a contraction of the muscles of the velum of the corresponding side; the velum is lowered, and the pillars are approximated. Upon excitation of bulbar roots of the spinal accessory, the soft palate is raised on the corresponding side, and the mucous membrane is creased transversely.

A. Cartaz.

Hamilton, H. D.—*Symmetrical Congenital Defects in the Anterior Pillars of the Soft Palate.* Montreal Medico-Chirurgical Society, March 9, 1894.

Two elliptical fissures, half an inch long and three-sixteenths wide, were observed in this patient, who was at the time suffering from laryngeal and pulmonary phthisis. Dr. Hamilton considered the case one of separate investment of the fibres of the palato-glossus muscle. There was an absence of any cicatricial tissue in the neighbourhood.

George W. Major.

Lederman, M. D.—*Alarming Secondary Hæmorrhage following Removal of Hypertrophied Tonsils with the Galvano-Cautery Snare.* "Annals Ophthal. and Otol.," April, 1894.

THE hæmorrhage occurred five days after the operation, and was very alarming.

R. Lake.

Birkett, H. S.—*Small Pedunculated Polypus of the Left Tonsil.* "Transactions of the Montreal Medico-Chirurgical Society," Dec. 15, 1893.

THE tumour was removed from a child four months old. It was about the size of a pea and consisted microscopically of a superficial layer of flattened epithelium, with sub-epithelial connective tissue, beneath which were a series of glandular alveoli, separated by fibrous septa. The gland tissue was that typical of mucous glands, and showed no adenomatous overgrowth. The growth was benign.

George W. Major.

Brickley, E. W.—*Lupus Vulgaris.* "Journ. of Ophthal., Otol., and Laryngol.," April, 1894.

REPORT of a case of pharyngeal lupus treated by scraping and lactic acid.

R. Lake.

Hacker.—*Case of Œsophageal Stricture.* Gesellschaft der Aerzte in Wien. Meeting, May 18, 1894.

THE author showed a patient with an Œsophageal stricture, caused by injury, and improved by dilatation with bougies. He also showed a large piece of bone revealed by the Œsophagoscope and extracted.

Michael.

Mayo, W. J.—*Stricture of the Œsophagus; Division and Dilatation after Gastrostomy and Œsophagotomy.* "New York Med. Journ.," April 7, 1894.

THE patient, aged three years, had an impermeable stricture, due to swallowing some lye one year before. Gastrostomy after Fenger's method was performed. One month later, Œsophagotomy. After considerable difficulty two strings were passed through the stricture—one to divide it

according to Abbe's method, and one to steady it. Shots were afterwards clamped on and drawn through the sinuous tract. Five weeks later, bougies were used, and the patient eventually recovered and took food by the mouth. *R. Lake.*

Pater, A. J.—*Two Cases of Rupture of the Œsophagus.* "Med. News," May 12, 1894.

IN the first the œsophagus ruptured into the left pleura during, or rather at the commencement of the act of vomiting. There was evidence of œsophago-malacia, to which the rupture was attributed. The second was caused by erosion of the wall by an aortic aneurism. *R. Lake.*

NOSE AND NASO-PHARYNX.

Wright, J.—*Asepsis and Antisepsis in the Nose and Throat.* "Annals of Ophthal. and Otol.," April, 1894.

THE statements of Lermoyez and Wurtz are combated by bacteriological investigations by the author, who has found, as have Besser and Dellelli, numerous pathogenic organisms in apparently healthy noses. The paper concludes with advocating the efficient use of antiseptics before and after all operations here as elsewhere. *R. Lake.*

Jones, W. S.—*Unusual Morbid Growths of the Nose and Mouth.* "Therapeutic Gazette," March 15, 1894.

THE first, a carcinoma of the inferior and middle turbinated bones, was removed by the curette. The second was a similar case, and was treated in like manner. The third was an ossifying fibroma of the alveolar process, which was removed with the galvano-cautery snare. There was no recurrence in any of the cases. *R. Lake.*

Levy, R.—*Inoperable Sarcoma of the Nose.* "New York Med. Journ.," March 17, 1894.

A DETAILED report of a large-celled sarcoma of the superior maxilla. *R. Lake.*

Gibb, J. S.—*The Importance of Early Recognition and Treatment of Obstructive Diseases of the Upper Respiratory Tract.* "American Lancet," May, 1894.

THE author urges careful attention to the nose and naso-pharynx in all cases, even where there is no obvious connection between the disease and the parts mentioned. *R. Lake.*

Reuter (Ems).—*Disturbances of the Olfactory Sense.* "Wiener Allg. Med. Zeit.," 1894, Nos. 20, 21 and 22.

REVIEW of the literature. *Michael.*

Lewis, F. D.—*Nasal Reflexes.* "Journ. of Ophthal., Otol., and Laryngol.," April, 1894.

TWO cases of nasal reflexes cured by operation. The second was affected with asthma, which was cured by removal of hypertrophic tissue from the middle turbinated body. *R. Lake.*