

## Obituary

Acute arthritis must occasionally be diagnosed from parotitis; and if of dental origin in a child, may disappear to reappear in adult life. Extension of the inflammatory process to the external auditory meatus is a grave complication. For treatment the author favours vaccines, and performs arthrotomy only in the presence of obvious pus. For the chronic form of arthritis he prefers iodine ionisation to diathermy.

The sections of the book dealing with trismus, and with luxations, as also the anatomical classification of deformities, are well arranged. The important subject of prognathism is illustrated by photographs of dental casts, as well as by skiagrams; and the description of operative procedures for temporo-maxillary ankylosis is enhanced by pictures of prosthetic appliances.

The thoroughness with which the author treats the subject of fractures is exemplified by the multiplicity of remote sequelæ with which he deals; such as partial deafness and ecchymoses of the neck.

This work supplies a valuable book of reference on a subject with which most practitioners are relatively unfamiliar.

H. LAWSON WHALE.

## OBITUARY

R. MCKENZIE JOHNSTON, M.D.

AFTER a brief period spent in general practice, Dr McKenzie Johnston turned his attention to the study of diseases of the ear and throat at a time when specialists were not so numerous as they are to-day. In the Spring of 1890 he was appointed assistant surgeon to the ear and throat department of the Royal Infirmary of Edinburgh, then in the charge of Dr Peter McBride. At this time there was no accommodation for the treatment of in-patients, and the necessity for beds for this purpose was becoming increasingly clamant. Accordingly, in 1891, six special beds were provided in the Infirmary for ear and throat cases. For thirteen years Dr Johnston held the position of assistant surgeon, until, in 1903, on the retirement of Dr McBride, he became full surgeon, and succeeded to the appointment of university lecturer on diseases of the larynx, ear, and nose. With the slow but steady growth of the department during Dr McBride's tenure of office, and with the establishment, in 1897, of the lectureship, the increasing amount of work gradually outgrew the accommodation hitherto assigned to it. A separate pavilion was accordingly built and equipped with twenty-four beds, with commodious out-patient rooms and a lecture theatre. This was completed in 1903, and was occupied for the first time by Dr McKenzie Johnston shortly after his appointment as surgeon. He brought to the equipment of the new

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department an essentially practical mind and an intimate knowledge of what was necessary in the installation of electrical equipment and the appliances required for the conduct of the work.

After thirteen years of diligent and unremitting attention to duty as assistant surgeon, and after holding for a brief period the senior position which he had deservedly merited, his professional career was unfortunately brought to an end by an illness which incapacitated him for further usefulness as a teacher. Realising that his disability would act as a hindrance to his powers as a lecturer, he decided to demit office rather than jeopardise the teaching of his subject in the medical school. Consequently, in July 1906, he resigned his hospital and university appointments. Dr Johnston faced the situation with admirable fortitude, and after a long period of rest he returned to work, applying his energies in other important directions. For nearly twenty-five years he took a very active part in various administrative posts, and the Royal Infirmary, the University, and the Royal College of Surgeons of Edinburgh reaped the benefit of his administrative and financial ability. In 1907 he joined the Board of Management of the Royal Infirmary, and for twelve years served the institution as a Manager, giving ungrudgingly much time and attention to its affairs. For over twenty years he was an active and valued member of the University Court. As Secretary to the College of Surgeons for ten years, he devoted himself with untiring application to the duties of that office, and his election as President of the College in 1917 was an honour duly merited by his previous services.

A. LOGAN TURNER.

## LETTER TO THE EDITOR

### PAPILLOMA OF THE LARYNX AND TUBERCLE.

TO THE EDITOR,

*The Journal of Laryngology.*

DEAR SIR,—A week or two ago I was told, in the usual rather vague terms of medical rumour, that somebody had been saying that there was some connection between papilloma of the larynx and tuberculosis.

The suggestion naturally made no impression. One is familiar enough with the protean nature of laryngeal tuberculosis, and with papilliform outgrowths from a tuberculous nidus. But that what we may call clean papilloma should have been linked in any cause-effect relationship with tubercle seemed to me to be merely the result of one of those coincidences that have led to so many errors in medicine.