

apparatus, which rarely gives rise to objective demonstrable changes in the relation of conduction and resonance, but which probably co-operates with them. The circumstances favouring the lateralization in the ear under investigation depend upon reflexion of sounds waves and the exclusion of noises from without, and not upon the influence of increased hearing power on one side, namely, increased pressure on the internal ear with so-called hyperæsthesia of the acoustic nerve. Weber's test depends, therefore, upon complicated relations, so that it is not permissible to use it blindly as a means of diagnosis, although when employed with judgment it can give very valuable indications.

Dr. LUCÆ (Berlin) remarked that when the tuning-fork was placed on one side of the head its vibrations were carried diagonally to the opposite ear, the sound waves, therefore, striking the opposite membrane more perpendicularly and setting the conducting apparatus more strongly into vibration. Similar influences could be observed when the tuning-fork was placed on different parts of the mastoid, so that the sound vibrations were conveyed in different directions to the membrana tympani.

Dr. BECKMAN (Berlin) doubted whether sound waves from the mastoid process could fall perpendicularly upon a drum membrane which was directed forwards, inwards, and downwards, but only from a point situated in front of the ear. *Dundas Grant (Trans. and Abs.).*

ABSTRACTS.

DIPHTHERIA, &C.

Engelman, Rosa.—*Observations and Statistics upon the Use of Antitoxin in One Hundred Cases of Diphtheria.* "Journ. Amer. Med. Assoc.," Feb. 22, 1896.

THE observations were based upon the use of antitoxin in the Health Department of Chicago. There were one hundred and three cases injected, in all of which a diagnosis was made from a bacteriological examination. Fifty were laryngeal cases. There were only seven deaths; and the good results are attributed to the fact that the antitoxin was used before the third day in ninety-one cases. Two cases of paralysis occurred within twenty-four hours after using the antitoxin. The failures are ascribed largely to too late use of the antitoxin, and to its too sparing use at the beginning. *Oscar Dodd.*

Goodall, E.—*Post-Scarlatinal Diphtheria.* "Lancet," Mar. 14, 1896.

THE author acknowledges the frequent association or co-existence of scarlet fever and diphtheria and gives a statistical study of the subject. *StClair Thomson.*

Saint-Philippe and Tocheport.—*On Anti-Diphtheritic Serum Treatment.* "Archiv. Clin. de Bordeaux," Nov., 1895.

DURING February and March, 1895, the authors have treated seventy cases of children from six months to ten years, with six deaths, all of which were from

broncho-pneumonia. Sixteen cases underwent tracheotomy. False membranes, laryngitis, and bronchitis yield rapidly to the treatment, only broncho-pneumonia resists; and the authors suggest, when the child has not been operated upon, and has no canula to expectorate with, whether it is wise to continue to soften the exudations which fill the chest when there is no power to expel them. The authors review their experience with considerable detail, and the new method of treatment has given the following results in Bordeaux:—1. A very sensible diminution in the number of tracheotomies (in three months from twenty-seven to thirteen). 2. A lowering of the mortality from twenty per cent. to ten per cent. Locality has something to do with virulence, and the authors state that diphtheria in Bordeaux is less virulent, and less septic, than that of other localities—as, for example, Paris.

R. Norris Wolfenden.

White, A. C.—*Antitoxin: Indications for its Use and Mode of Administration.* "Brooklyn Med. Journ.," Feb., 1896.

THE author considers that the most favourable results are obtained in the most severe cases. He has observed no marked change in the disappearance of membrane produced by antitoxin, but rather a great improvement in the general condition of the patient, often in spite of persistence of the local condition. Among practical points he draws attention to the fact that, in severe cases, Behring's No. 3 serum, or Aronson's preparation, alone should be used, the weaker serums No. 1 or No. 2 of Behring not acting efficiently although given in large quantities. No 1 is only intended for immunization. Whereas five cubic centimètres of the strong serum should be used in children under five, twenty cubic centimètres are not too much for grown children. A second dose may be given if no improvement is observed after nine or ten hours. He recommends a spot below the nipple for the seat of injection, and the use of Roux's syringe with its india-rubber tube, which saves pain caused by struggling during the injection.

Ernest Waggett.

MOUTH, TONGUE, &C.

Anderson, William.—*Carcinoma Lingue.* "Quarterly Med. Journ.," Jan., 1895.

THE author deals first with what he calls the precancerous stage, warning against too prolonged watching of the lesion, but still more against the use of caustics. The offending part should be cut out. Again, in doubtful cases a piece of the diseased tissue is to be cut out for microscopic examination, and if this still leaves the question unsettled, then the surgeon's duty is to give the patient and not the disease the benefit of the doubt—*i.e.*, excise the peccant tissue. Where the diagnosis is certain, "excise without a day's unnecessary delay." Excision of the growth may best be undertaken in all but exceptional cases after ligature of the lingual artery (on one or both sides) at its origin. All enlarged glands should at the same time be removed for histological examination. If these prove cancerous, or if recurrence become evident in the submaxillary triangle, the whole triangle should be cleared out, after ligature of the external carotid. Enlargement of the deep cervical glands beneath the sterno-mastoid forbids further attempts at extirpation.

A. J. Hutchison.

Ballenger, W. L.—*Angio-Neurotic Œdema.* "Medicine," Feb., 1896.

A CASE of angio-neurotic œdema, affecting the uvula, pharynx, and nose, with threatened suffocation from involvement of the larynx. It occurred in a young