of speaking apparatus arises. Opinions are invited as to the advisability of this, and the form of apparatus most likely to be useful.

Congenital Deformity showing a Nose with Four Nostrils.—Sir StClair Thomson.—The patient is a female infant, aged four weeks. The extremity of the nose shows three good-sized vestibules with two columellæ, and, on closer inspection, a smaller fourth orifice is visible. Further examination with a probe shows that it is the most external orifice on each side which is the true air-passage, the two supplementary orifices being internal to them. These latter orifices are blind *cul de sacs*, the smaller one being only about $\frac{1}{4}$ in. long, while the larger one passes inwards for $\frac{1}{2}$ in. There is a deviation of the end of the septum to the right: this is interesting in view of the general agreement that nearly all deviations are acquired and that most of them are traumatic.

Opinions are invited as to (*a*) the embryological origin, (*b*) the operation advised, and (*c*) the age at which treatment should be undertaken.

Nasopharyngeal Growth for Diagnosis.—Buckland Jones.—Patient, a male, aged twenty-eight, complains of nasal obstruction and occasionally of feelings of suffocation. There is no history of pain or hæmorrhage or of any previous operation. Opinions are requested as to (1) the nature of the growth, and (2) as to the advisability of operative interference.

Case of Fibrosarcoma?—A. L. Macleod.—Patient, a male, aged seventeen, by occupation a labourer. Duration of the disease, eight months. In January last he began to bleed from left nostril; this continued every few days, and he found difficulty in breathing. In March there was yellowish discharge from left nostril. No feeling of growth in the throat was present. He came to Leicester Infirmary in October. Two attempts to remove the growth with the snare failed, even a very thick wire breaking.

Pathologist's Report.—The section shows huge masses of bacteria (probably staphylococci) throughout the granulation-tissue. There is no evidence of neoplasm in the section.

ROYAL SOCIETY OF MEDICINE: THE SUMMER CONGRESS OF THE SECTION OF LARYNGOLOGY.

Her Highness Princess Marie Louise visited the Summer Congress of the Section of Laryngology at the Royal Society of Medicine on Saturday afternoon, May 3. She was received by Brig.-Gen. Birkett, C.B., C.A.M.C. (Montreal), Hon. President of the Congress, Dr. James Donelan, President of the Section of Laryngology, Sir Humphry Rolleston, K.C.B., President of the Royal Society of Medicine, Dr. W. Pasteur, Hon. Treasurer, Mr. J. Y. W. MacAlister, Secretary, and by Dr. Irwin Moore, one of the Hon. Secretaries of the Congress.

Her Highness was greatly interested in the exhibits of Plastic Facial War Injuries from the Queen's Hospital, Sidcup, shown by Major H. D. Gillies, R.A.M.C.

She availed herself of the opportunity of inspecting many of the rare books and manuscripts with which the Library is so richly endowed, as well as a most interesting collection of manuscripts and instruments belonging to the late Sir Morell Mackenzie, recently presented to the Royal Society of Medicine by Mr. Mager, upon which we hope to publish an account in a future number of this Journal.

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