UCHERMANN, V. (Christiania).—**Adenoid Vegetations.** *Norsk Magazin for Laeger, November*, 1887.

After a short review of the pathology and treatment of adenoid vegetations, the author quotes several cases, amongst others a case of a child, aged four, with hereditary syphilis, upon whom he operated for adenoid vegetations, and another case in which an adenoid growth was situated on the Eustachian tube.

Holger Mygind.

SCHECH (München).—**On Asthma.** *Münchener Med. Wochenschr.*, 1887, Nos. 40, 41.

The author found diseases of the nose in 64 per cent. of his cases of asthma. If disease of the nerves could cause asthma, it must be combined with unusual irritability of the nerves. It may be caused by irritation of the olfactory nerve, but more often of the trigeminal nerve from contact of such parts of the nose as, normally, are not in contact with each other. It may be caused also by psychical irritation, as in the well-known case of John Mackenzie (an artificial rose). The nasal therapeusis of asthma owes its effect to the removal of the abnormal contact of parts of the nose, and the restitution of normal circulation. The real nature of asthma is a spasm of the bronchial muscles. The spirals of Curschman and the crystals of Leyden are not the cause, but the effect of asthma.

Michael.

TONSILS, PHARYNX, &c.

SANDERSON, —. (Sussex).—**Pulsating Vessel in the Pharynx.** *British Medical Journal, September* 17, 1887.

Case of a lady, aged sixty, in whom a pulsating vessel the size of a crow quill could be seen and felt between the posterior faucial pillar on the right side, and the posterior wall of the pharynx. The patient suffered from catarrh of the throat and nose. There were no enlarged glands in the neck, as had been found in some cases by Farlow.

Hunter Mackenzie.

WALKER-DOWNIE (Glasgow). — **Dryness of the Throat from Excessive Tea-drinking.** *Practitioner, October*, 1887.

The author, three years ago, pointed out that cheap, inferior tea, literally *stewed*, and partaken of with every meal, by the lower class of patients, was a potent factor in the production of dry pharyngitis. Under chalybeate treatment (such patients being anæmic and badly fed) and the liberal use of farinaceous food and milk, the patients

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rapidly recovered. Change of diet alone is sufficient to cure the condition.

This form of dry pharyngitis (not involving the naso-pharynx) is in great measure due to the dyspepsia caused from drinking stewed tea before, with, or after meals, and also to the local astringent and irritant effect. Total abstinence from tea should be rigorously enjoined.

BENDER (Bonn).—**On Lichen Ruber of the Skin and Mucous Membranes.** *Deutsche Med. Wochenschr.*, 1887, No. 39.

IN two cases of this disease the author saw a continuation of the exanthem on to the mucous membrane of the mouth. On the palate were little white tubercles, and on the back of the tongue white plaques. Small tubercles were also visible on the pharynx and its lateral walls. MICHAEL.

WILLETT, GEORGE, G. D. (Bristol).—**Retro-pharyngeal Abscess.** *British Medical Journal, October* 8, 1887.

A SHORT note descriptive of the case of a man aged fifty, who had complained for some weeks of dysphagia. He died suddenly after admission to the Bristol Royal Infirmary. *Post-mortem* examination revealed a retro-pharyngeal abscess, with a sac nine inches long, and containing a pint of thick, curdy pus. No eroded or bare bone was felt. HUNTER MACKENZIE.

ALSBERG (Hamburg).—**Artificial Teeth in the Œsophagus: Œsophagotomy—Cure.** *Deutsche Med. Wochenschr.*, 1887. No. 39.

THE teeth could not be removed *per vias naturales*; œsophagotomy was therefore performed the same day. After the incision it was not possible to remove the teeth through the wound, but it was practicable to make them movable, and to extract them through the mouth. The foreign body was a palate with six teeth. The wound in the œsophagus was sewn up, and the skin-wound dressed with iodoform gauze and closed on the tenth day. MICHAEL.

LARYNX.

BARRON, B. J. (Bristol).—**Hoarseness and Loss of Voice.** *Bristol Med. Chir. Journal, September*, 1887.

THE author's cases have fallen under the following heads:—Chronic laryngitis, hysteria, laryngeal phthisis, laryngeal anæmia, acute laryngitis, laryngeal syphilis, growths in the larynx, aneurism, œdema of the larynx.

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