NOSE AND NASO-PHARYNX.

FIRIVE (Christiania).—**Blennorhœa Nasi.** *Berlin. Klin. Wochenschr.*, 1887, No. 35.

PURULENT secretions arise in the nose from foreign bodies, affections of the bones, empyema of the antrum of Highmore or of the frontal sinus. MICHAEL.

ISCH-WALL. — **On the Erectile Tissue of the Nasal Fossæ.** *Progrès Médical, September* 10, 1887.

AFTER speaking of the works of Zuckerkandl, Hack, and John Mackenzie, the author says that the erectile tissue of the nasal cavities is primarily constituted of capillaries, which later on show considerable development and important modifications. The mucous membranes of a certain number of embryonic mammals have been examined, preparations of the nasal mucosa of the fœtus of pigs, cats, wolves, rats, and men having been made, and in all a fairly abundant capillary network has been found. The nearer the fœtus approaches the moment of birth, the more these capillaries are developed. The author has also examined the mucosa of adult animals. In man, on cutting across the middle turbinated body he saw at first rather large gaps in the spongy tissue of the bone; the chorion is also occupied by dilated spaces larger in proportion to their proximity to the deep layer of mucosa, where their volume is considerable. On the broad margin of the mucosa, under the epithelium, are found large dilated spaces, whilst in the deeper parts abundant veins are seen. This tissue is, then, primarily formed of capillaries, which expand enormously in the process of development, and are transformed into cavernous organs susceptible of erection.

The author then commences the study of pathological and physiological facts (borrowing the greater number from the works of John Mackenzie) to show how close the relations are between the erectile tissue of the nose and the generative organs, and concludes thus:—The cavernous tissue of the nose is the starting-point of certain reflexes, notably of erection in a good number of cases; on the other hand, genital erection reacts on it, making it turgid. JOAL.

SOTA Y LASTRA.—Foreign Bodies in the Nasal Fossæ. *Revista Médica de Sevilla, September* 30, 1887.

THE author refers to five cases in his own practice; the first one of a hair-pin, in the left nasal fossa, which had necessarily to be drawn out through the mouth by means of the naso-pharyngeal polypus forceps; the second one of a leech, adherent to the posterior

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surface of the middle turbinated bone of the right side, which was drawn out through the anterior opening of the nose by means of nasal polypus forceps; the third of a chickpea, lodged in the left nasal fossa, which was broken and drawn out in pieces with forceps; the fourth of a piece of sponge, in the right nasal fossa, which was spontaneously expelled; the fifth of the calix of a rose, in the left nasal fossa, which was drawn out by means of a small ivory spoon of the kind used to clean the auricles. SOTA Y LASTRA.

RUAULT, A.—On the Employment of Cocaine as a Hæmostatic in the Treatment of Epistaxis, and in Rhino-surgery. *France Médicale, October* 1, 1887.

COCAINE is not merely a local anæsthetic, but also a local vaso-constrictor, for the lessening in volume of the nasal mucous membrane produced by this agent is owing to the rapid depletion of the submucous erectile tissue. These two properties of cocaine are independent of one another; the disappearance of sensibility is not due to local anæmia, since tissues deprived of vessels—*e.g.*, the turbinated bodies—are rendered anæsthetic with the greatest ease. The vaso-constrictor result is not due to direct action on the vessels: Bosworth has noticed that this action is confined to the venous sinuses, and does not extend to the capillaries. Indeed, cocaine does not make the nasal mucosa any paler than before the application, and it is therefore probable that this loss of blood is due to a reflex action making itself felt on the small arteries and the smooth fibres of the erectile tissue. Ruault has employed cocaine for two years as a hæmostatic, and uses solutions of 20 per cent. to 30 per cent.; he soaks a plug of cotton-wool in the fluid, and leaves it in the nasal cavities for at least nine minutes. In spontaneous epistaxis the plug should be left in for two or three hours. The author has stopped thus a certain number of hæmorrhages: one of the patients had been obliged previously to submit to tampons. The use of cocaine also arrests the hæmorrhage following nasal operations, *e.g.*, ablation of polypi. JOAL.

ZIEM (Dantzig).—**On Post-nasal Operations under the Guidance of the Finger.** *Monatsschr. für Ohrenheilk., etc.*, 1887, No. 9.

A VERY well written apology for pharyngoscopical operations under the guidance of the finger instead of the rhinoscope. It is simpler and easier to operate in this manner, and the application of the galvano-caustic wire to the hinder part of the nasal conchæ can especially be more easily performed, as a case of the author proves. Other operators have also occasionally adopted this method, but it is worthy of more frequent application. MICHAEL.

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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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