[What is to be thought of the practitioner who would prefer such a charge against a *confrère*? We hope the Polish law is not without means of reaching the offender.] **Const. Karwowski.**

LARYNX.

LANDGRAF.—On Affections of the Larynx in Croupous Pneumonia. *Charité Annalen.*, 1887, *p.* 277.

In eighty cases of pneumonia seen by the author two cases presented ulcerations on the processus vocales. Of these one is since dead, the other was cured with cicatrization. **Michael.**

LEWIN, G. (Berlin).—**Contribution to the Knowledge of Laryngeal Perichondritis, with special reference to Syphilis.** *Charité Annalen*, XII., p. 728, 1887.

Communication of a case of specific perichondritis, the subject of which died suddenly. The autopsy showed that the whole cricoid cartilage was transformed into a perichondritic abscess. The cartilage which is most frequently affected is the arytenoid, next the cricoid, and lastly the thyroid. The progress and symptomatology of these cases vary according as the disease is primary or secondary. Syphilitic perichondritis is characterized by the absence of pain. The process may be progressive or retrogressive. In specific cases running their natural course without treatment gummatous perichondritis may be metamorphosed into an abscess which will speedily open. The sequestrated cartilage is then coughed out. In the secondary form the cure is often only relative with production of stenosing cicatrices and ankylosis of the crico-arytenoid joint. Therapeusis must be anti-syphilitic, and in case of great stenosis tracheotomy must be performed. **Michael.**

CHARAZAC.—Sulphur in Laryngeal Tuberculosis. *Soc. Méd. de Toulouse, September*, 1887.

Dr. Moure, in a communication made to the Copenhagen Congress, had the distinction of being the first to protest against the employment of sulphur in laryngeal phthisis. The author also would warn against the tendency of so many physicians to send patients indiscriminately to Cauterets, Eaux Bonnes, Luchon, &c., afflicted with throat complaints of the most various kind. When sulphurous waters are administered in laryngeal tuberculosis congestion is observed to replace anæmia, so that while the mucosa was previously pale, it becomes difficult to distinguish the true cords from the ventricular bands, the whole has such a rosy tint. The author publishes the cases of seven patients whose condition has been aggravated by sulphur waters. In one, infiltration, ulceration, and considerable loss of substance of the epiglottis resulted. In another, after a year at Cauterets, the epiglottis became œdematous and exhibited numerous ulcerations ; the arytenoid

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region and ventricular bands were very tumefied. One patient had to undergo tracheotomy at the thermal station in consequence of œdema glottidis. In the seven patients acute symptoms developed in the larynx. Charazac concludes, to give sulphur waters in laryngeal tuberculosis is to furnish a most favourable soil for the development of germs, and cites Pidoux, who remarks as follows—"Sulphur waters are always fruitless or harmful in true laryngeal phthisis." **Joal.**

PRZEBÓRSKI.—Methods of Treatment of Laryngeal Phthisis. *Gazeta Lekarska*, No. 37—39, 1887.

AFTER having described the methods of Krause, Jelinek, M. Schmidt, Gottstein, Massei, Hering, and others, the author gives preference to Hering's method of treatment, and describes five cases in which lactic acid, scarification, curetting, &c., have given excellent results as regards the cure of phthisical ulcers. **Const. Karwowski.**

WRÓBLEWSKI.—Large Papilloma of the Larynx; Extirpation by the Curette; Cure. *Klinika*, No. 22, 1887.

THE author believes himself to be the first to have employed the curette for the extirpation of a large papilloma, which, springing from the inferior third of the epiglottis, almost completely occluded the opening of the larynx, leaving only a space admitting a sound of very small calibre. The tumour was completely immoveable. The patient, who breathed with great difficulty, presented external signs of chronic perichondritis, with accumulation of pus round the thyroid cartilage. The patient also presented a mass of polypi in the left nares. There had never been syphilis. The patient had suffered for six years. Treatment was commenced by performing laryngotomy through the crico-thyroid ligament, leaving the cricoid cartilage intact. During the operation, and for some days after, the patient passed through the canula a large amount of pus. Six days after the first operation, the author commenced to remove portions of the papilloma by means of Hering's sharp curette, the whole being completed on the sixth sitting. The canula was removed on the twentieth day, and six days later the patient left the hospital cured, presenting only a smooth cicatrix on the epiglottis, not impeding the movements of this organ in the least. Anatomico-pathological examination of the tumour, made by a specialist, demonstrated nothing suspicious, and proved it to be composed chiefly of granulation tissue. The author believes that the origin of the excrescence was simple inflammatory perichondritis, with partial necrosis and elimination of the necrotic parts of the thyroid cartilage. **Const. Karwowski.**

MACDONALD, GREVILLE (London).—**Two Cases of Idiopathic Intra-Laryngeal Abscess.** *Lancet, September* 24, 1887.

IN the first case, a woman aged forty, and probably syphilitic, an enormous swelling was situated on the right ventricular band, from which, after puncturing, creamy pus exuded. The author conjectures that the abscess may probably have been due to an acute inflammatory attack supervening upon a chronic laryngitis. In the second case, a woman

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aged thirty-eight, there was found projecting inwards from the right ary-epiglottic fold, and resting apparently on the ventricular band, a smooth, dull red, somewhat translucent swelling. Pus was liberated as in the first case. Both rapidly healed after evacuation of their contents.

Hunter Mackenzie.

DEFONTAINE.—Inter-crico-thyroid Laryngectomy. *Pratique Médicale, October* 11, 1887.

THE author shares the opinion of Chauvel, Marchand, Gosselin, Gougenheim, &c., that this operation should not be practised in old people, children, or in cases of laryngeal disease leading to ossification of the cartilages. On the other hand, the operation is preferable to tracheotomy when extension of the head causes asphyxia, when there is only a little space between the cricoid and the sternal fourchette, when there is considerable vascularization of the neck, and when the trachea is deeply seated.

Joal.

ALFRED SOKOTOWSKI.—Syphilitic Stenosis of the Trachea and Bronchi. *Gazeta Lekarska*, No. 37, 38, 1887.

THIS condition is rare, and at the commencement is impossible to diagnose. At a later period, viz., that of stenosis, asphyxia is well characterized by inspiratory dyspnœa. It occurs oftenest in men, as a phenomenon of acquired syphilis, or in children, of hereditary origin. It is curable only in the earliest stages. Two cases have been observed by the author. One was a young man of nineteen, who had experienced cough for three years, and nocturnal attacks of dyspnœa for three months. In one of these attacks life was only saved by prompt tracheotomy. Two weeks after a severe dyspnœic attack carried the patient off. At the autopsy was found great stenosis of the trachea due to cicatrices, and to pressure on the recurrent laryngeal nerves by enormously hypertrophied lymphatic glands, and complete obstruction of the bronchi by mucus. The author believes that death was due to paralysis of the dilator muscles of the glottis, and stoppage of the bronchi by mucus. The second case was that of a man of fifty-six, in whom dyspnœa and asphyxiative attacks appeared twenty-two years after the syphilitic contagion. He had been tracheotomized during an attack, lived for five months, eventually dying of pneumonia. No autopsy was made, but as the patient presented during life characteristic deep ulcers and cicatrices on the body, exostosis of the tibia, and paralysis of the posterior crico-arytenoid muscles, the author based his diagnosis of syphilitic stenosis of the bronchi on the similarity of this case to the previously recorded one, and to other recorded observations.

Const. Karwowski.

BUTZ.—Prophylactic Tamponnading of the Trachea. *St. Pet. Med. Wochenschr.*, 1887, No. 72.

TO prevent the entrance of blood into the lungs, and to simplify narcosis in operating on the mouth and pharynx, the author performs prophylactic tracheotomy. To the canula is fixed a communication with the chloroform mask, and the pharynx is tamponned with iodoform gauze. **Michael.**

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HANOT.—Cervico-broncho-tracheal Adenopathy. Perforation of the Œsophagus and Trachea. Intestinal Septicæmia. Grey Pneumonia of the Lower Lobes of both Lungs. *Archives Générales de Médecine, September*, 1887.

AT the autopsy of the patient, twenty years old, it was found that at the level of the perforation, the trachea and œsophagus opened into a cavern formed out of suppurated ganglia, and full of sero-purulent liquid. An intractable diarrhœa and two pneumonic nuclei had developed from the passage of the putrid matters into the intestine and the pulmonary alveoli. **Joal.**

NECK, &c.

MORRIS, HENRY (London).—**Two Cases of Disease of the Thyroid—One Treated by Excision, the Other by Injection of Iodine; Recovery; Remarks.** *Lancet, September* 24, 1887.

BOTH were cases of simple hypertrophy of the gland. "The object in putting the case of thyroidectomy on record is because now, at the end of three years, the girl is in good health, and shows no sign whatever of any threatening of myxœdema." **Hunter Machenzie.**

OECHEL (Berlin).—**Cases of Strumectomy and Cachexia Strumipriva.** *Inaugural dissertat., Berlin*, 1887.

OF seven cases operated upon by Bardeleben, three are since dead, and four are cured, but in not one of these cases did any symptoms of cachexia follow. **Michael.**

OBOLINSKY (Krakau).—**Modern Surgery of Goître.** *Wiener Med. Presse*, Nos. 30, 31, 1887.

CASE of struma operated upon by ligature of all four thyroid arteries, with good result. **Michael.**

KÖHLER.—Communications from the Surgical Clinic of Professor Bardeleben. *Deutsche Zeitsch. für Chirurgie, Bd.* 26, *pp.* 1, 2.

REPORT of twenty-four extirpations of the thyroid gland; of these nine were partial and fifteen total extirpations; five of the latter are dead. The other ten are cured, and without any sign of cachexia strumipriva or myxœdema. **Michael.**

LUCY, REGINALD H. (Plymouth).—**Leucoderma associated with Graves's Disease.** *British Medical Journal, September* 17, 1887.

RECORD of a case in a female aged twenty-one years. The author remarks upon the unusual nature of this association.

Hunter Mackenzie.

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