on post-rhinoscopic examination, if made early enough. Such anginas sometimes follow digital examination of the naso-pharynx, which he always now examines with a protected finger. In the surgical anginas which occur after operations on the nose, he considers that the site of infection is the lymphatic tissue in the nasal mucous membrane. He considers it well known that a surgical scarlet fever, which sets in after operations, may run its course without producing the customary angina. If any operative wound furnishes the site of entrance for the scarlet fever germ, the scarlet fever angina is absent; but scarlet fever following the removal of adenoids is a form of surgical scarlet fever by itself, as the site of entrance is in the same location as in ordinary scarlet fever. Consequently, in these cases the angina is also present.

In order to keep the clinic as free as possible from pus of all acute and profuse chronic otorrhœas, the auditory canal is drained with a strip of gauze, and an ear dressing is applied. Instruments are boiled, including the olive tips of the auscultation-tubes and the pharyngeal mirrors. All instruments are placed in a porcelain dish after use, collected by the nurse, and boiled. The syringes are fitted with metal pistons. A mixture of hot and cold water is used for syringing, without the addition of any disinfectant. Gauze and cotton in a sterilized condition are always at hand. The cotton is wound round thin pieces of wood, which are sterilized in small test-tubes and are thrown away after use. The *Staphylococcus albus* is the commonest microbe, but the *Bacillus pyocyaneus* sometimes appears, the most efficacious agent against infection by this microbe being a 2 or 5 per cent. solution of nitrate of silver for impregnating packing and dressings.

Dundas Grant.

Mosetig-Moorhof.—*Iodoform Bone-Stopping.* "Centralblatt für Chirurgie," 1903, No. 16.

The author recommends the filling up of large holes made in bones by means of "stopping," consisting of 60 parts of iodoform with 40 of spermaceti and sesame oil, of the consistency of a viscid fluid. The cavity, after being thoroughly cleared of all disease, is cleansed with formalin, or in case of hæmorrhage a from 3 to 20 per cent. solution of peroxide of hydrogen, then dried out by means of hot air and filled with the mass above described; he has used it in 120 cases with perfect result. Three radiograms are given, which show very distinctly the diminution in the size of the iodoform plug, as iodoform acts to the rays just as a metal would do. (This method of procedure may be applicable in some cases of operation on the frontal sinus and the mastoid process.—D. G.) *Dundas Grant.*

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