lionic compression. This nerve is composed of pneumogastric and spinal accessory fibres. The former fibres are smaller in quantity, their excitability is lost sooner than the spinal fibres, and it is not irrational to suppose that they submit first to the "*contrecoup*" of ganglionic compression, or of neuritis, and that they may be damaged, while the spinal filaments preserve their action. The influence of these latter predominating, the glottis will be closed and the cords approximated. JOAL (Mont Dore).

NECK, &c.

WEIR.—Tumour of Thyroid removed by Socin's Method. *New York Surgical Society, December* 8, 1886 (*Med. News, January* 25, 1886).

SOCIN'S operation of enucleating the thyroid tumour now embraces over fifty cases, without any cachexia strumapriva following. In Dr. Weir's case the patient was a dwarf of twenty-one, mentally defective, and with an appearance of commencing myxœdema. The thyroid gland was exposed, cut through, and the tumour enucleated with the end of a scalpel and the finger nail, the venous oozing being checked by clamps and ligatures, and the cut gland edges sewed together except at the lower end, to allow the insertion of a drainage tube. Secondary union followed. The tumour was friable, and divided into lobes, like a compound racemose gland, with tubes and ducts lined with cylindrical epithelium, and the whole enclosed in a delicate fibrous capsule. The diagnosis was adenoma.

DE BURINE.—Considerations on Goître, dependent on Pregnancy and Accouchement. (Considerations sur le Goître, dependant de la Grossesse et de l'Accouchement). *Thèse. Paris, December*, 1886.

THE author relates nineteen observations, of which three are original. The thyroid gland is related to the female genital organs sympathetically. Uterine excitements are reflected in this organ so greatly that a sign of virginity has even been sought for in the volume of the neck. Thyroid hypertrophy has been noticed at the time of puberty, or the menopause. Goîtres have even appeared at each monthly period, disappearing on its cessation. Pregnancy is analogous. We can imagine that with the uterus, the vagina, the round ligaments, and the breasts, the thyroid gland acquires an

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access of vitality, hypertrophying, becoming more vascular, and the seat of hypergenesis of lymphoid follicles, such as are found in all the female organs in a state of gravidity. The author protests against thyroidectomy during pregnancy, as a dangerous operation.

JOAL (Mont Dore).

DUGUET.—Goîtres and Interstitial Medication with Iodine. (Goîtres et Medication Iodée Interstitielle.) *Procès agregé à la faculté Med. de l'Hôp. Lariboisière. Paris, December*, 1886.

TOTAL extirpation of the thyroid being followed with such grave sequelæ (myxœdema) the author thinks that treatment should be limited to injections with tincture of iodine, especially as partial extirpation does not forbid a recurrence.

The author cites the cure of twenty-one cases out of thirty-four treated by him with iodine injections; of the other thirteen, seven cases were ameliorated; the remainder are incomplete.

It is not the character of the goître, cystic, parenchymatous, &c., but the age of the tumour which will influence the result of treatment. Old goîtres remain refractory.

Tincture of iodine acts, 1st, by the irritant action of the alcohol; 2nd, by the specific action of the iodine. Dr. Duguet has made 266 injections without accident. JOAL (Mont Dore).

GALLOZZI, Prof. C.—Echinococcus Cysts in the Thyroid Gland. (Ciste da Echinococco della Glandola Tiroide.) *Riforma Medica, No.* 288.

A MOST interesting case, in which, while emptying the cyst, there came away pieces of tissue belonging apparently to the maternal vesicle, although the chemical and microscopical examinations have not been concluded. MASSEI.

WIGNALL.—Research on the Micro-organisms of the Mouth. (Recherches sur les Micro-organismes de la Bouche.) *Archiv. Physiologie, December*, 1886.

BESIDES the micro-organisms already known, viz., staphylococcus pyogenes albus, staph. pyog. aureus, leptothrix buccalis, bacterium termo, bacillus subtilis, vibrio rugula, the author describes a coccus which has been recognised by Escherich in the fæces of infants, nourished as yet only with maternal milk; it occurs in the form of a small sphere, of about 0·5 μ diameter, rarely in the form of chains, single and isolated. Then follows the study of—1, a micro-organism, occurring as a pretty large bacillus, of variable length, rectilinear, and sometimes forming chains; 2, small short rods, of variable dimen-

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sions, and secreting a strongly adhesive substance; 3, of a short, thick bacillus, with slightly rounded extremities, and becoming clear at the centre when the culture is old. The author also describes ten new organisms of the mouth, which brings their number up to sixteen.

JOAL.

PONCET.—Tubercular Ulceration of the Tongue. Treatment by Eucalyptol and Lactic Acid. *Lyon Médical, January*, 1887.

A CASE of a patient presenting tuberculosis of the right apex, similar ulcerations of the tongue, and digital ulcerations of the same nature. Tubercle bacilli were found in these latter. The patient had been put under a course of treatment by eucalyptol and lactic acid (80 per cent.). The ulcerations of the fingers were dressed with lint dipped in eucalyptol, twelve to fifteen days after the wounds were nearly completely cicatrised, but this was only in appearance, since the skin was infiltrated with fungosities below the epidermic secretion. Dr. Poncet thinks that eucalyptol acts as a desiccator of the secretions, but there is no proof that it is a microbe destroyer. As to lactic acid, used for the ulceration of the tongue, it produced much pain, lasting for an hour after the application, but no appreciable amelioration of the condition.

JOAL.

COMBE (Paris).—**Catarrh of the Maxillary Sinus. The Limits of its Curability. Its Treatment by Antiseptic Powders, and especially by Iodol. (Catarrhe du Sinus Maxillaire. Les Limites de sa Curabilité. Son Traitement par les Poudres antiseptiques et en particulier par l'Iodol.** *Second French Congress of Surgery*, 1886.

THE only treatment adopted for this complaint, is that of trephining the cavity; introduction of a metal drainage tube; and the application of antiseptics by powder or irrigation. Injections introduced through the nasal fossæ are of no effect. M. Combe thinks that in certain cases of obstinate ulcerations of the turbinated bodies, beneficial results are obtained by injections of carbolised glycerine, and insufflations of iodol in powder through the sinus made by trepanning.

JOAL.

BOURRÉE.—Contribution to the Study of Acute Sublingual Ranula. (Contribution à l'Etude de la Grenouillette aigue Sublinguale.) *Thèse. Paris, December*, 1886.

THE author examines the different theories as to production of ranula—1st, dilatation of Wharton's duct; 2nd, dilatation of a sublingual gland; 3rd, acute œdema, or congestion of the floor of the

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mouth; 4th, dilatation of the Blandin-Nühn gland; 5th, dilatation of Fleischmann's bursa, and comes to the conclusion, that ranula is produced by the rupture of Wharton's duct, oftenest, and to the consecutive inundation of Fleischmann's bursa. The mechanism of its production comprises three factors—1st, obliteration of the excretory duct; 2nd, dilatation of Wharton's duct; 3rd, rupture of the duct, and effusion of the liquid into a closed, pre-existing cavity. The causes from which acute ranula may arise are numerous and variable: formation of a calculus in the excretory duct, a tumour compressing its orifice,

HAWARD, W. On some forms of Defective Speech. *Lancet, January* 15, 1887.

A CLINICAL lecture on the vocal education of patients who have been operated on for cleft palate, highly-arched palate, post-nasal growths and nasal polypi, with remarks on stammering, &c.

REPORTS OF SOCIETIES.

Academy of Medicine, Ireland.

December 3, 1886.

Stricture of the Œsophagus.—Mr. Edgar Flinn exhibited the œsophagus and stomach of a man who died from epithelioma of the œsophagus. The œsophagus was very much narrowed in its lower fourth, and the most contracted part of the stricture was found to be about three-quarters of an inch from the cardiac orifice of the stomach, and would hardly admit of a small-sized pen-handle being passed through it. The stomach was enormously dilated—so much so that when the abdomen was opened it appeared to fill up the entire cavity. A large fruit-stone was found immediately contiguous, and somewhat beneath the pyloric orifice, imbedded in a diverticulum. This fruit-stone must have lain in this diverticulum for a long time, the post-mortem appearances showing that its passage through the œsophagus would have been well-nigh impossible during the last two years of the patient's life; from its position near the pylorus, it exercised a considerable pressure on the pyloric orifice, and thus, in great measure, the great dilatation of the stomach was to be accounted for.

Clinical Society of London.

January 14, 1887.

Mr. MAYO ROBSON (Leeds) read a paper on a method of treating thyroid cysts, in which he advocated antiseptic incision and stitching the edge of the cyst to the skin, draining for a short time under an antiseptic dressing, and then packing with zinc lotion and lint. An interesting discussion followed, with reference chiefly to risks from hæmorrhage.

Harveian Society.

January 6, 1887.

Dr. MORTON read a paper on "The Analogy between Croup and Asthma," the object of which was to compare stridulous laryngitis—to which he gave reasons

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