

TREATMENT OF OZÆNA BY THE CONDENSATION FORM OF HIGH-FREQUENCY CURRENT.

M. GENDREAU showed two patients affected with ozæna whom he treated according to the advice of M. Zimmern. The small condenser electrode mounted on a Bisserie's handle and connected to a large Oudin's resonator was introduced for five minutes in each nasal fossa with a 1 to 2 cm. length of spark; three sittings a week. After twelve sittings these patients are much improved, and may even be considered cured. They no longer exhale fœtid odour, nor expel crusts; their nasal respiration is free, and one of them has recovered the sense of smell.

J. VELLARD.

(H. CLAYTON FOX, *Trans.*)

 Abstracts.

NOSE.

Wishart, D. J. Gibb (Toronto).—*Malignant Disease of the Nose*. "Journ. of Med. and Surg.," May, 1908.

A history of seven cases.

CASE 1.—October, 1894; man, aged fifty-four. When seen, removed a bleeding polypoid mass from left nasal passage. Six months later nostril was more extensively filled by progress of the disease. Microscopical examination proved it to be scirrhus carcinoma. An external operation was then done, removing part of the nasal bone, the nasal process of superior maxillary, outer wall of antrum, floor of the orbit and the body of the ethmoid, together with a large amount of pus. The incisions healed by first intention, but the disease returned, and patient died several months later.

CASE 2.—January, 1900; youth, aged seventeen. Smooth rounded mass, filling back part of left nose. It had pushed septum over to right. Post-nasally mass filled posterior nares. No bleeding. Three months later all symptoms advanced; growth nearer anterior nares; soft and movable; soft palate depressed. Microscope revealed sarcoma. After applying galvano-cautery once, patient passed out of writer's hands. Three years later patient placed himself under care of Price-Brown, with excellent results, as reported. [October, 1908, patient in good health; no return of the disease.—ABSTRACTOR.]

CASE 3.—October, 1902; nurse, aged thirty-five. Irregular mass in middle meatus on left side of nose. Well-marked proptosis of the eye, and absolutely dark antrum. She declined operation. Coley's fluid was then used. She died six months later after extensive involvement of neighbouring tissues.

CASE 4.—July, 1904; woman, aged sixty-two. Complete left stenosis, with pain and bleeding. Tumour filled left nasal chamber, extending

into posterior nares. Microscopical examination proved it to be round celled sarcoma. Operation by external incisions. Tumour filled the antrum. The anterior inner and posterior walls of the antrum and floor of orbit were all removed. The wounds healed slowly, discharge ceasing in six weeks. Twenty-two months later patient died of sloughing ulcers of feet, etc., and septicæmia. Never any return of facial growth.

CASE 5.—November, 1906; man, aged fifty-seven. Right nasal cavity free, with septum curved to left posteriorly. Left side very open in front, but filled from floor to roof in rear part with new growth, which bled freely on touching. Soft palate and pressed down. Naso-pharynx filled with irregular mass. Galvano-cautery operations under cocaine were carried on for some time. But as pain continued to be severe, and the patient grew rapidly weaker, they were discontinued. Examination of segment proved case to be malignant. Patient succumbed.

CASE 6.—October, 1907; man, aged forty-eight. Many years ago nose was broken and deformed. Right nasal stenosis commenced twelve months ago, was complete six months later. Frontal and occipital headaches, much offensive discharge, swelling on right side of nose, no ear symptoms, no epistaxis, irregular growth in right nostril, left passage free, no appearance of growth post-rhinoscopically, no enlarged glands. Microscopical examination proved growth to be malignant. Preliminary thyrotomy was done, and anæsthetic given through the opening in crico-thyroid membrane. A modified Rouge operation followed. The anterior wall of antrum, outer wall of nose, ethmoid cells, what remained of turbinals and anterior wall of sphenoid, with much pus, were all removed. Patient made an uneventful recovery, as reported four months later.

CASE 7.—Youth, aged seventeen. Right nasal passage blocked. Disease so extensive that it was considered inoperable, but on account of alarming hæmorrhage the external right carotid was tied. Ten days later, circulation in temporal artery having returned, the ligature was repeated, affording temporary relief. *Price-Brown.*

LARYNX.

Roger, Paul.—*A Variety of Laryngeal Stridor cured by the Removal of Adenoids.* "Ann de Méd. et Chir. Inf.," July 15, 1907. Review by PH. KUHN, Berlin, in "Arch. f. Kind.," Bd. 49, Heft 1 and 2

This refers to the case of a baby, aged sixteen months, who had suffered from laryngeal stridor since the age of six months. At twelve months nasal respiration was much impaired. Operation brought all symptoms absolutely to an end within three weeks. The author refers to the similarity of his observations with those of Eustace Smith, who attributed a spasm of the ary-epiglottic folds to adenoid vegetations.

Alex. R. Tweedie.

Mancioli, Prof.—*Two Symptoms of Lesion of the Recurrent Nerve. Abatement of the Pulse, and Anæsthesia of the Vestibule.* "Bollettino delle Malattie dell'Orecchio, etc.," November, 1908.

By stretching the recurrent nerve the author has experimentally produced in dogs a lowering of the pulse, which he could not produce by section or compression of the nerve.

It seems that this effect, which can be produced by the least stretching