

THYROID GLAND, &c.

Lloyd, Jordan (Birmingham).—*Bronchocele*. "Brit. Med. Journ.," November 28, 1891. Birmingham, etc., Branch of the Brit. Med. Assoc., November 12, 1891.

EXHIBITION of a large, solid, unilateral bronchocele, weighing nearly one and a quarter pounds, successfully removed from a woman aged fifty-one. It had been growing slowly for forty years, and had for several years back compressed the trachea. *Hunter Mackenzie.*

Wiesner (Hassmersheim).—*Movable Goitre*.

THE author speaks of a patient, sixty-nine years of age, suffering from goitre on the right side. The left side of the larynx was free, but on the other side a large tumour could be felt moving against the thoracic walls. It would be about the size of a child's closed hand. It was diagnosed as a case of movable goitre. *Michael.*

Langendorf (Königsberg).—*Study of the Thyroid Gland*. "Med. Woch.," 34, No. 37.

A STUDY of thyroid glands and their functions with regard to the purification of the blood. *Michael.*

Ribbert (Bonn).—*Regeneration of the Parenchyma of the Thyroid Gland*. "Archiv für Physiologie," 1889, 219 pp.

AFTER parts of the thyroid glands have been removed in dogs and rabbits in all new growths of the connective tissue can be detected, and within a few days a new formation of colloid substance takes place. If the portion removed be not too great new normal gland tissue rapidly forms. *Michael.*

Freund.—*Relation between the Thyroid Gland and the Mamma, and Female Genital Organs*. "Deutsche Zeitschrift für Chirurgie," 31, pp. 5 and 6.

(1) SWELLING of thyroid gland may be noticed during pregnancy. (2) The gland is enlarged in every case, almost up till the act of birth; (3) the gland may be enlarged during lactation. In forty-four cases of uterine fibroid chronic swelling of the gland was detected. *Michael.*

Paltauf.—*Abscess of Thyroid with Tumour of right Vocal Cord*. Gesellschaft der Aerzte in Wien. May 8, 1891.

THE author describes the case of a girl, twenty-one years of age, who died from septic mischief, following an abscess in the thyroid gland. The tumour was discovered underneath the left vocal cord, consisting of connective tissue. This had been diagnosed laryngoscopically previous to death. *Michael.*

Lehotzky.—*Sixty-two Cases of Enucleation of the Thyroid Gland*. "Wiener Klin. Woch.," 1890, Nos. 41 and 42.

THE author considers that most of these can be easily removed by

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excision. Secondly, the recurrent nerve is not difficult to avoid. Thirdly, the operation is comparatively easy. Fourthly, enough of the gland should be left to prevent any cachexia resulting. *Michael.*

Schwarze (Dorpat) and **Schulze** (Bonn).—*Consequences of Extirpation of the Thyroid Gland.* "Neurolog. Centralbl.," 1889, No. 8.

EXTIRPATION of the gland is said by these authors to cause an increase of electrical irritability to currents. Spasms are said to occur similar to those in tetanus after extirpation of the gland. *Michael.*

Köhler.—*Atrophy of Goitre following Partial Extirpation.*

THE communication of Julius Wolf concerning the atrophy of goitre following partial extirpation is confirmed by the following case:—A patient, sixteen years old, had a goitre of the size of the head of a man on both sides of the trachea, and had the right half of the tumour removed. Some weeks later the left half also disappeared. The circumference of the neck decreased from forty to thirty-four centimètres. *Michael.*

Kapper (Doboi).—*Treatment of Soft Goitres by Parenchymatous Injections of Iodoform.* "Zeitschrift für Therapie," Bd. 15, No. 9.

THE author has applied injections of iodoform in fifteen cases, as recommended by Mosevig Moorhof. In all cases he obtained a reduction of the circumference of the neck of eight to ten centimetres, and the therapeutic as well as the cosmetic result was very satisfactory. *Michael.*

Kaufmann (Zurich).—*Self Treatment of Thyroid Gland.*

THIS is the report of the case of a patient who treated himself by poultices. The tumour became soft, opened gradually, and after a discharge of pus was cured. *Michael.*

Köhler.—*Cure of Myxœdema.* Freie Vereinigung der Chirurgen in Berlin. Meeting, Oct. 12, 1891.

A PATIENT, forty-eight years old, with myxœdema, was treated for long without any effect. She had also a large ulcer in the left sternoclavicular region like a large gumma. Near the ulcer also was a tumour of the size of an egg. By anti-syphilitic treatment the ulcer was cured, and all symptoms of myxœdema, the defective mental state, and the infiltration of the whole skin, disappeared. The author believes that in this case the myxœdema was caused by syphilitic degeneration of the thyroid gland. *Michael.*

Mosler (Greifswald).—*On Myxœdema.* "Therap. Monats.," 1891, No. 9.

THE author refers to cachexia strumipriva and genuine myxœdema. In spite of the fact that in such cases the thyroid gland is often intact, a connection between the gland and the disease must exist. *Michael.*

Mislavsky, Alexandr A. (Ekaterinburg).—*Lympho-Sarcoma of the Neck.* "Transactions of the Ural Medical Society," 1891, Vol. I., p. 8.

THE author reports the case of a pale but fairly well-nourished peasant boy, aged nine, who was admitted to the Verkho-Isetsy Hospital on

account of an indolent, fairly dense and knobby huge tumour, occupying the right side of the neck. Its upper margin reached the inferior edge of the lower jaw and the auricle; the lower extended down to the clavicle anteriorly, and the spina scapulæ posteriorly; the anterior boundary was situated close to the trachea and the larynx, and the posterior in the vicinity of the transverse processes of the cervical vertebræ. The new growth measured vertically 21 centimètres, and in the antero-posterior diameter 33. The axillary and all other lymphatic glands were normal; in fact, the examination of all organs failed to detect any deviations from the standard. According to the parents' statement, when the patient was three years of age they had first noticed a globular hard lump of the size of a nut situated on the right side of the neck, midway between the lower jaw and the clavicle. The swelling remained stationary until eight months ago, when it began to steadily and rapidly increase in size, and that notwithstanding a persevering medical treatment. In consideration of the facts, Dr. Mislavsky decided to excise the neoplasm. The operation (under chloroform) lasted about one hour, hæmorrhage being but slight. After the enucleation of the tumour *in toto* the wound (19 centimètres long) was closed with sutures and supplied with drainage. The sutures were removed on the sixth day, when the wound was found healed *per primam*, except a small area about the lower angle.

The new growth (weighing 1½ pound) proved to consist of adenoid tissue. In view of its rapid increase, however, the author is inclined to believe that he had to deal not with a simple lymphoma, but with a lympho-sarcoma.

Valerius Idelson.

E A R, & c.

Szenes (Perth).—*An Audible Noise in the Ear.* "Internationale Klinische Rundschau," and "Centralblatt für Klin. Med.," 1891, p. 871.

A GIRL of ten had a "ticking" in one ear, which could be heard at a distance of about five inches, and had a snapping character occurring about 120 to 130 times a minute, not synchronous with the pulse. It continued during sleep. The hearing power was normal, but the drum membrane showed signs of old inflammation. It was supposed to be caused by rhythmical contraction of the tensor tympani or palatal muscles.

Dundas Grant.

Heimann (Warsaw).—*Blows on the Ears.* "Arch. of Otol.," 1891.

THE author relates a case in which a blow on the ear was followed by death in a week. The patient, who denied previous ear-disease, received a blow on the ear through the irritation caused by his apathetic condition. Acute otitic symptoms followed, and an amount of constitutional disturbance, which led to a diagnostic difficulty in excluding typhoid fever. This was cleared up, and little doubt was then entertained that the ear-