

Left cord is fixed in cadaveric position—edge convex and swollen on the upper surface. Diagnosis was laryngitis acuta circumscripta rheumatica, with infiltration and false ankylosis of the crico-arytenoid joint.

He was treated with salicylate of soda. Four days afterwards pain ceased; eight days later swelling disappeared—only slight hyperæmia; vocal cord is movable. No history of syphilis or tubercle.

Case 2. T. P., forty-nine years of age. Four days pain in neck on swallowing; last night cough and hoarseness. Present state: Introitus laryngis injected—posterior part swollen. Partes arytenoidæ infiltrated, bluish, and cedematous. Vocal cords slightly injected—otherwise normal and movable. Recovery in two days, after use of salicylate of soda.

The author has also seen a third case, but gives no description.

Wallace, Alexander.—*Atonic Aphonia.* "Lancet," Oct. 30, 1897.

THE value of this report is, to a large extent, neutralized by the unfortunate absence of the report of any laryngoscopic examination. It appears to have been a case of hysterical mutism, and is interesting as occurring in an adult male.

St Clair Thomson.

ŒSOPHAGUS.

Snyder, A. A.—*Œsophagotomy and Removal of Dental Plate with Upper Central Incisor Tooth.* "New York Med. Journ.," Sept. 18, 1897.

THE patient, a woman of twenty-two, had swallowed a broken dental plate, which had lodged in the œsophagus. She was seen the following day, when her voice was deficient, and she complained of much pain above the sterno-clavicular joint on the left side. Attempts at removal of the obstruction had failed owing to the extremely irritable condition of the mouth and pharynx, in spite of cocaine applications and ninety-grain doses of potassium bromide in three doses. After much difficulty a flexible bullet probe located the obstruction at five and a half inches from the incisor teeth, and an operation was advised and accepted. On the third day from the date of the accident the plate was removed. A two-inch incision was made along the inner edge of the sterno-mastoid muscle, the skin having first been drawn a little towards the median line so as to form a valvular opening. The jugular vein and common carotid artery were exposed. A long probe passed through the mouth into the œsophagus located the latter, which was then incised by a cut large enough to admit the little finger. The plate and tooth measured one and a half inches by one and a quarter inches. The patient made an excellent recovery. It may be added that the X rays failed to locate the foreign body in this case.

Sandford.

THYROID, &C.

Rodocanachi, A. J.—*Four Cases of Goitre treated by Operation, and Certain Dangerous Symptoms which may follow the Operation.* "Lancet," Oct. 9, 1897.

THE symptoms to which the author wishes to draw attention are essentially restlessness, a rapid pulse, rapid respiration, accompanied by a considerable