

opposite mucous surfaces being deprived of their covering epithelium by extensive operations, involving the turbinates as well as the septum, pre-disposed towards the formation of adhesions. And in connection with that fact he wished to say in reply to Dr. Tilley's expression of surprise, viz. that he (the speaker) should have so often met with adhesions, following the use of the galvano-cautery or intra-nasal operations, that these adhesions had not been produced by *him*, but had occurred in the practice of other operators, the patients in question having subsequently consulted him with a view to being relieved, if possible, of the continued obstruction.

Then, again, there was great discrepancy with regard to the sub-mucous use of the galvano-cautery. Dr. Dundas Grant had evidently found it useful, whilst Dr. Bronner regarded it as an unsurgical procedure.

Numerous other points could be enumerated in which diametrically opposed views had been expressed, but this was hardly necessary, as the discussion had shown throughout that the selection of the subject had been a judicious and a timely one. This discussion would certainly be studied in this country and abroad with the greatest interest by all specialists, and the various points raised would receive greater attention than they had so far in rhinological text-books. This had been his aim when he proposed this subject for discussion, and he hoped it was fair to sum up the result of the discussion by saying that this aim had been fully achieved.

Abstracts.

PHARYNX.

Birkett, H. S.—*A Case of Tuberculosis of the Pharynx.* "Montreal Medical Journal," July, 1903.

The patient was a boy, aged fifteen years. Enormous masses, consisting of soft granulation tissue resembling frog-spawn, filled the lateral walls of the pharynx. The upper surface of the palate and walls of the naso-pharynx were infiltrated in a similar manner, rendering nasal respiration impossible. The mucous membrane of the surrounding structures was exceedingly pale.

The family history evinced a strong tubercular tendency from the father's side, and the patient occupied a room in which one of his uncles died of tuberculosis. Still, his lungs were normal and the expectoration negative. Temperature was likewise normal.

The question presented itself, Was the condition inherited syphilis, tuberculosis, or malignant disease? The first was negated by the absence of all corroborative symptoms; the last by the rarity of occurrence at his age, the indolent type of the granulation tissue, and the absence of infiltration into the surrounding tissue.

Under ether the masses were removed. Pathological examination proved the presence of giant-cells as well as a few tubercle bacilli. The use of tuberculin showed the typical reaction. Curetting, lactic acid, and X rays were subsequently used in the treatment. Although not cured at the time of writing, much improvement had taken place.

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