

TRACHEA.

Boulay, Maurice and Gasne—*Two Cases of Subglottic Foreign Bodies in Children.* "Annales de Maladies de l'oreille, etc.," September, 1903.

The first case was one in which a child had swallowed a piece of cork, the other a fish bone. The X rays gave no assistance, and, although tracheotomy gave relief, any attempt to remove the tube was followed by symptoms of suffocation.

The authors used a cannula with a window on its convex surface, through which they were able to pass sounds of varying sizes; in this way the foreign bodies were dislodged from the mucous membrane and, by manipulation and retraction, were engaged in the opening of the cannula and removed. The authors point out the significance of being able to diagnose the nature of tracheal obstructions by the use of sounds used in this manner.

Anthony McCall.

THYROID.

K. A. Krause and C. Hartog.—*Post-typhoid Strumitis with the Demonstration of Typhoid Bacilli in the Pus.* "Berlin klin. Woch.," August 17, 1903.

The case narrated was one of a man, aged twenty-three, the subject from childhood of a small goitre. He became affected with typhoid fever, which ran a rather severe course but ultimately subsided. After subsidence of the pyrexia the goitre became tense and swollen, and produced pressure-symptoms. Fluctuation was made out, and on exploration odourless, creamy, brownish-yellow pus was obtained, from which a pure culture of typhoid bacilli was got. A small punctured incision was made, and drainage carried out. Recovery rapidly ensued, and in place of the former swelling there remained merely a small scar from the incision. The writer refers to a work by Tavel on the *Étiologie of Strumitis* (Sallmann, Bâle, 1892).

Dundas Grant.

Bingham, G. A.—*The Operative Treatment of Goitre.* "Canadian Practitioner and Review," August, 1903.

In selecting cases for operation the writer lays down several important rules. In anæmic girls at the age of puberty rapidly growing goitres will sometimes disappear gradually, with or without treatment, and hence should not be surgically interfered with except under urgent conditions. He believes also that no goitre should be operated upon for purely æsthetic reasons; and as the operation is not a light one, it should not be undertaken by a novice. All benign cases should first be submitted to a course of medical treatment, unless danger from pressure seriously threatens; and in support of this idea Kocher's experience at Berne is quoted, 90 per cent. of his cases of goitre being so much relieved by medical treatment that operation was not required.

In summing up, the writer says that in all cases of solid or cystic goitre of a benign nature operation should only be done for the relief of definite symptoms. In malignant disease of the thyroid, extirpation after early diagnosis is the only hope. In advanced cases of malignant