course (probably lymphatic) of the microbic agent, which would have invaded the mastoid notwithstanding early paracentesis.

H. Clayton Fox.

Sewell, Lindley.—A Case of Chronic Supportative Otitis Media with Labyrinthine Fistula and Spontaneous Nystagmus. "Lancet," January 1, 1910.

Girl, aged six. Right discharge four years after measles. Headache, vomiting, and dizziness eight days before admission. Foul pus and epithelial débris, posterior superior perforation, small granulations. No mastoid swelling or tenderness. Gait unsteady, tumbling to right, sometimes to left (over-correction). Romberg, fell to right. Spontaneous horizontal nystagmus to left, less marked on extreme deviation to right; increased by caloric test. Nystagmus to right on air-pressure. Voice heard at four feet. No apparent impairment in auditory perceptive apparatus. No strabismus, no optic neuritis. Pulse 84, temperature 97° to 98.6° F. Radical mastoid; temporal bone hollowed by foul cholesteatoma; tiny fistula in external canal; stapes present. Recovery uninterrupted; gait steady in three weeks. Nystagmus diminished slowly; present slightly on deviation of eyes to left three months later.

Macleod Yearsley.

MISCELLANEOUS.

Simpson, W. K.—Clinical Experiences with Calcium Lactate in Hæmorrhages of Upper Respiratory Tract. "Boston Med. and Surg. Journ.." November 25th, 1909.

A description of the uses of calcium lactate in hæmorrhages, and to less dangers of bleeding in operations. The cases treated were mostly severe forms of epistaxis, and seventy-five cases of removal of tonsils and adenoids. The dose in an adult may be sixty grains as an initial dose, repeated in twenty-four hours, or thirty grains three times a day, taken when the stomach is free from food. In children, thirty to twenty grains as a first dose, then twenty or ten grains thrice daily. The salt should be given three days before and three days after operation.

Macleod Yearsley.

REVIEWS.

The Frontal Sinus: Contributions to the Topographical-Surgical Anatomy and to the Study of the Diseases of the Frontal Sinus [Die Stirnhöhle: Beiträge zur Topographisch-Chirurgischen Anatomie und zur Lehre von den Erkrankungen der Stirnhöhle]. By Prof. A. Onod. With 107 illustrations taken from life-sized photographs. Vienna and Leipzig: Alfred Hölder, 1909.

Professor Onodi has in this work, as in the others which we have previously had the advantage of studying, appealed to Nature to supply us with facts, and it is with facts that his book is filled. In the eighty-