ROTH also had observed Vascular Navi in the Mouth.

STOERK had observed *Hæmoptysis* caused by vascular ramifications on the uvula. Destruction of the tumour by nitric acid brought about a cure.

IIAJEK has cured *Recurrent Bleeding of a Venous Tumour* of the lingual tonsil by the application of chromic acid.

KOSCHIER showed a *Recurrent Lymphangioma*, situated on the ary-epiglottic fold. Now the tumour is much increased, and suspected to be a sarcoma.

CHIARI showed *Two Nasal Stones*, which he had removed. One was from a girl eleven years old, and had as centre a fruit stone. The other was from the nose of a woman sixty years old, and showed as centre a piece of slate. The same patient had a congenital osseous atresia of the left choana. The author also showed some rhinoliths from cases already published.

EBERSTEIN showed a case of Laryngeal Tuberculosis with Abscess of the Right Vocal Band the size of a pea. The patient had also had an abscess of the epiglottis. Michael.

## Øbítuary.

## WILHELM MEYER,

## Born October 25th, 1824, died June 3rd, 1895.

An exceptionally active and useful life was brought to a close on the 3rd of June, when one of the foremost representatives of our specialty, WILHELM MEYER, passed away in his seventy-first year.

HANS WILHELM MEYER was born in the year 1824, in the Danish town of Fredericia, where his father, who was at that time a surgeon in the Danish army, lived. From 1826 to 1843 WILHELM MEYER was educated at Glückstadt, in Holstein, to which place his father had been removed with his regiment. After the latter date WILHELM MEYER went to Copenhagen to study medicine at the University, and so great was his industry that he finished his medical studies as early as 1847, although the usual time employed for this purpose was seven years. He, moreover, passed his final examinations unusually brilliantly ("laudabilis et quidem gregie"), and thus early gave promise of his future renown. After having acted as his father's assistant, MEYER went abroad from 1851 to 1853, studying pathology and therapeutics at the universities and hospitals of Würzburg, Prague, Vienna, Montpellier, Paris, London and Edinburgh. On this journey he formed friendships with many members of the profession, who remained his sincerest friends until the last.

After his return, MEYER settled down in Copenhagen as a general practitioner, and by degrees, owing to his great conscientiousness and devotion to his patients, collected one of the largest general practices in the city, which practice he kept until his death.

It is indeed wonderful that a man who was so fully occupied as MEYER should have found time to devote himself to a specialty, and still more wonderful that he became one of the most distinguished members of that specialty; both facts, however, are only a proof of MEYER'S marvellous industry and unquestionable genius. But the admiration for

514

our deceased colleague becomes still greater when we learn that it was his noble and sympathetic heart which first pointed to the path in which he has since done such good and lasting work. The circumstances were as follows : in his general practice MEVER often met with patients who were rendered almost desperate by deafness, noises in the ears or severe pains in the ears—cases which most medical men at that time tried to get rid of, when syringing out of the meatus or instillation of oil or milk did not produce any beneficial effect. WILHELM MEVER, however, endeavoured to obtain as much information as possible in the diagnosis and treatment of ear-diseases through the few then-existing otological works, and thus quite autodidactally he became the famous otologist of his time.

It was whilst practically investigating car diseases that MEVER made the discovery which will for ever be connected with his name : the discovery of adenoid vegetations in the naso-pharynx. On the 22nd of October, 1867, he took under treatment a young girl from Jutland, who was suffering from considerable deafness; he observed besides that the patient was almost entirely unable to breathe through the nose, in spite of his treatment of a chronic catarrh of the nose and pharynx. He came to the conclusion that the obstruction to the nasal breathing must necessarily be situated in the naso-pharynx, and he found, on passing his finger up behind the soft palate-what, strange to say, few medical men seem to have done previously in similar cases-that the nasopharynx was filled with peculiar growths, on the removal of which the patient's nasal breathing became perfectly easy. MEVER now surmised that the girl's car disease had been caused by these growths, and on examining other ear-patients he discovered the same disease of the naso-pharynx.

With the energy and perseverance so peculiarly his own, he now continued his investigations of these hitherto almost unknown growths, which it is true had been observed by some few earlier investigators, but without any exact description of them having been given, much less had they recognized their great practical importance. At the end of 1868 MEVER published his first account of adenoid vegetations in the Danish medical paper "Hospitalstidende." In 1869 "Schmidt's Jahrbücher" gave a report of the work, and in 1870 MEVER published his extended investigations in the "Medico-Chirurgical Transactions of London," without, however, general attention being drawn to the great importance of the disease. It was first when WILHELM MEVER, in 1873, published in "Archiv f.ir Ohrenheilkunde" an exhaustive and complete description of the ctiology, morbid anatomy, symptomatology, sequelæ, and treatment of adenoid vegetations-a description which is in every way a thorough classical work, to which nothing of any importance has since been addedthat the discovery was generally recognized, and the discoverer awarded the position among specialists which he held till his death.

Besides several minor works connected with his specialty, MEVER published in 1884, in "Archiv für Ohrenheilkunde," an excellent article proving the important part which necrosis of the walls of the tympanum plays in the etiology of chronic suppuration of the tympanum, and during

0.0

latter years he was engaged in collecting the materials for a large work on adenoid vegetations. He, however, only succeeded in finishing the introductory chapter of this work "On the Age and Extension of Adenoid Vegetations," which appeared as an article in the Danish medical paper "Hospitalstidende" quite recently.

But MEYER was even greater as a man than as a physician, for in him were united in an unusual degree the best qualities both of heart and head. His remarkable intellectual gifts were evinced in his surprising memory, his acute observation and his pronounced critical powers, which latter were very frequently directed to himself and his own scientific work, of which the least arduous cost him considerable time, so that he wrote but seldom and unwillingly. Thus, for instance, his article on the history of otology in Schwartze's "Handbuch der Ohrenheilkunde" took him over a year and a half to write, although it is only a few pages in length; but it is also with justice considered a perfect standard work on account of the great learning displayed and the elegance of style. To these qualities must be added an almost unique industry and power of work. MEYER was never unoccupied ; when he returned home in the evening after a hard day's work, which besides three or four hours' consultation often included between thirty and forty professional visits, he hardly ever rested, but as a rule read until far into the night, and his reading embraced all subjects-natural science, philosophy, literature, religious works; in fact, everything which can interest a man of education.

It is needless to say that he kept pace with everything new in the medical world. His information on all subjects was unusual. He was, further, an enthusiastic musician and astronomer, and frequently passed both summer and winter nights engaged with his telescopes. Finally, he was an accomplished linguist, and at the International Congress in Copenhagen—when he was president of the laryngological and otological section—was much admired by his foreign colleagues for the ease with which he spoke the three official languages.

But it was MEYER'S nobility of heart, which he often hid under a reserved and formal exterior, that made the deepest impression on all those who came in more immediate contact with him. His loving and sympathetic nature was especially apparent in his relations with his many patients, for whom he sacrificed himself entirely. He was also a faithful friend, whose worth was especially felt in times of adversity.

MEVER received the marks of honour which generally fall to the lot of great medical men, comparatively late in life. He received the Swedish order of Nordstjernen in 1880, as an acknowledgment of his treatment of the sons of the King of Sweden; in 1884 he was made honorary doctor of the University of Halle, and in 1894 he received the Danish title of "Etatsraad." He was also honorary member of several foreign scientific societies, amongst others, of the American Laryngological Association and of the London Laryngological Society.

During the last spring MEYER suffered from a severe attack of influenza, which weakened him considerably, and he, therefore, went to Italy to recruit his health. Apparently he had recovered entirely, but on reaching Venice on his homeward journey he was attacked by a disease called by the Italian doctors typhoid fever, which, in a little over a week, overcame MEVER's otherwise healthy constitution, and he breathed his last on the evening of the 3rd of June.

WILHELM MEYER'S loss will be sincerely felt by many, but the memory of a life so rich in thought and feeling will remain for ever with those who knew him, and his name will be preserved as long as the medical art endures. *Holger Mygind*.

## BIBLIOGRAPHY.

CHERVIN. Des fissures palatines au point de vue orthophonique. La Voix, Nov., 1893.

Roux. La tuberculose des amygdales dans ses rapports avec la tuberculose des ganglions cervicaux et des poumons. Gaz. Hebdom. de Méd., 9 Dec., 1893.

DUPLAIN. Papillite linguale. Gaz. des Hôp., 24 Oct., 1893.

DESHAYES. Pharyngite des priseurs. Mercredi Médical, 4 Oct., 1893.

FABRE. Du traitement des angines par les inhalations d'air surchauffé goudronné et de créosote phéniquée. Bull. Gen. de Clin. et de Therap., 15 Sep., 1893.

PERRIN. Angine couenneuse provoquée. Arch. de Méd. et de Chir. Militaires, Sep., 1893.

LOISEL. Les cartilages linguaux et le tissue cartilagineux chez les Gastéropods. Soc. de Biol., 24 Feb., 1893.

GOUBEAU. Accidents medullaires et angine infectieuse. Arch. de Méd. Milit., May, 1893.

PILLIET. Note sur un groupe des glandes salivaires de la tortue grecqueglandes juxta-maxillaires. Bull. de la Soc. Anat. de Paris, April and May, 1893.

BOULARAN. Contribution à l'étude des kystes uniloculaires des maxillaires. Thèse. Montpellier, 1893.

CHARCOT. Le syndrôme paralysée labio-glosso-laryngée progressive dans le tabes. Progrès Méd., 17 June, 1893.

CLAUDE. Cirrhose attrophique ; mort par hématemèse ; varices stomicales et @sophagiennes. Soc. Anat. Paris, May, 1893.

THOUVENET. Amygdalite catarrhale, compliquée de néphrite avec accidents urémiques. Limousin Med., May, 1893.

WAGNIER. Traitement de la pharyngomycose leptothritique par l'acide chromique. Rev. de Lar., 1 July, 1893.

BOHÉAS. Note sur une serie de cas d'angine infectieuse observés à bord du garde-côte cuirassé "le Caiman." Arch. de Méd. Navale et Coloniale. May, 1803.

HUDELO. Ulcère de la bouche d'origine tabetique (mal perforant buccal). Annal. de Derm. et Syph., No. 5, 1893.

GROSS. Rétrécissement néoplasique de l'œsophage. Rev. Méd. de l'Est. 15 July, 1893.

GESTAT. Considérations sur une forme de stomatite pseudo-membraneuse survenant dans le cours de la scarlatine. These. Paris, 1893.

DUDEFOY. Étude sur les phlegmons pharyngo-laryngós. Thèse. Paris, 1803.
DU CASTEL. Hydroa-buccal syphiloide. Soc. Franç. de Derm. et Syphil.
<sup>20</sup> July, 1893.

https://doi.org/10.1017/S1755146300153570 Published online by Cambridge University Press