Abstracts.

NOSE, NASO-PHARYNX, AND ACCESSORY SINUSES.

Crocket, A. P.—Chronic Suppuration of the Accessory Cavities of the Nose. "Maratime Medical News," June, 1903.

A well-prepared résumé of our present knowledge, dealing with the clinical history, diagnosis, prognosis, and treatment of chronic suppuration in the various sinuses. *Price-Brown*.

Knapp, Arnold. — Osteomyelitis of the Skull, with Empyema of the Nasal Accessory Cavities; Sinus Thrombosis; Pyamia; Death; Autopsy. "Arch. of Otol.," vol. xxxii., No. 3.

The patient was a girl aged twenty-one. She had had numerous polypi removed, and presented the characteristic "frog-faced" deformity. This was due to general ethmoiditis (an osteomyelitis), associated with empyema of all the accessory cavities of the nose. Osteomyelitis of the frontal bone set in, extending back to the squamous portion of the temporal bone. It then caused an epidural abscess, with thrombosis of the sigmoid sinus and fatal pyæmia, which complete evacuation of the venous channel was powerless to avert.

Dundas Grant.

Ross, G. T.—Mucoid Cyst of Left Middle Turbinal. "Canada Medical Record," February, 1903.

This occurred in a lad, aged sixteen years, who for a couple of months had complained of headache and facial neuralgia. He was anæmic, had grown rapidly, and was poorly nourished.

Inspection showed a smooth, globular, pearly tumour, distending the left nostril and pressing upon the septum. It was dissected out with cutting forceps, liberating a thick, semi-transparent, viscid fluid. The point of attachment was found to be the anterior.part of the middle turbinal bone. The result was rapid healing, with disappearance of all the symptoms. *Price-Brown*.

EAR.

Voss (Riga).—Three Cases of Encephalitis in Connection with Otitis Media. "Arch. of Otol.," vol. xxxii., No. 3.

The picture of the so-called acute, hæmorrhagic, non-suppurative encephalitis may at some time be encountered in a patient suffering from otitis media. Oppenheim's description of his cases is quoted as follows: "In all five cases there developed, acutely and with the symptoms of an infectious disease, a cerebral affection, which from the very outset presented, in addition to the general cerebral symptoms, focal symptoms, such as motor aphasia, usually in conjunction with right facio-brachial monoplegia (twice beginning with cortical epilepsy). Whereas the general symptoms usually quickly subsided, the focal symptoms alone persisted for some time." Voss gives notes of three cases in his own practice answering to the description.

Dundas Grant.