

stridor, spasm of the glottis, chorea of the larynx, laryngeal nystagmus, laryngeal vertigo, and spastic dysphonia. Stammering he looks upon as acquired, requiring for its treatment careful, patient, painstaking *education*. In deaths from anæsthesia in adenoid operations he considers that the "status lymphaticus" is always present. *Macleod Yearsley.*

**D. Bryson Delevan** (New York).—*Present Methods for the Treatment of Malignant Disease of the Larynx.* "Boston Med. and Surg. Journ.," September 15, 1904.

Treatment is discussed under the heads of: (1) Internal medication; (2) antitoxins; (3) liquid air; (4) ligation of the carotids; (5) X rays; (6) ultra-violet rays; (7) radium; (8) surgical methods. He considers that direct operation presents the only *certainly* of success in the curative treatment. He especially commends the work of Butlin. He urges the early recognition of the cases and believes thyrotomy and partial extirpation for all cases seen early, with small and sharply limited lesion, and total extirpation for the more advanced cases. He also thinks a preliminary tracheotomy, some time previous to the main operation, advisable. Great stress is laid upon the danger of excising portions of malignant growths for microscopic examination on account of the irritation and immediate stimulation of the growth to rapid and extensive development. *Macleod Yearsley.*

**Blois, Amory de** (Boston).—*Sub-glottic Tubercular Lesions of the Larynx.* "Boston Med. and Surg. Journ.," September 22, 1904.

The author remarks that it has always been a question for argument whether tuberculosis is ever primary in the larynx, and any instances which throw even a feeble light on the subject seem worthy to be reported. He details two cases, the first a youth aged twenty-three. He had marked pulmonary physical signs, with tubercle bacilli in the sputum. The larynx was hyperæmic and the cords somewhat reddened, but with their edges sharp and smooth. Between the cords and in the region of the anterior commissure was a round, red swelling, about one inch below the glottis. Two days later this broke down, forming a subglottic ulcer. It slowly healed under applications of lactic acid, with "creosotal" internally, and did not recur, although the pulmonary disease rapidly carried off the patient.

The second case was a youth aged twenty-four. The laryngeal appearances were remarkably similar to those of the first case. The vocal cords and arytenoids were somewhat swollen and slightly reddened, and, exactly in the same position as in the other patient, there was a similar open ulcer. There were physical signs at the right pulmonary apex. This case grew rapidly worse, the ulceration creeping up and involving the edges of the cords. He developed aphonia, difficulty of deglutition, and quickly died. *Macleod Yearsley.*

## EAR.

**Lucchesi, C.** (Naples).—*On a Rare Anomaly in the Anatomical Direction of the Lateral Sinus with Absence of the Mastoid Antrum in a Case of Subacute Purulent Otitis Media from Influenza with Mastoid Complications.* "Bolletino delle Malatt. Orec., Gola, e Naso.," Florence, May, 1904.

The right lateral sinus extended to Henle's spine, occupying the field

of operation on the antrum. The descending portion after bending was parallel to the posterior wall of the auditory meatus, and only 2 mm. distant; thence it descended to the apex, maintaining a superficial course throughout. The antrum was absent and was represented by a few cells above and behind the meatus. The anomaly was discovered in the course of an operation for the relief of symptoms of mastoid abscess. Wilde's incision was made, and above and behind the meatus and somewhat above the temporal line a small loss of substance with irregular edges was found. A sound penetrated a considerable distance, passing through necrosed bone situated near the tympanic ring. On attempting to open the antrum the lateral sinus was twice laid bare, without wounding it, 2 mm. from the cortex. The operation was completed by curetting the necrosed bone through the fistula and through the meatus. The patient made a rapid recovery. *James Donelan.*

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## REVIEW.

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*Essay on the Irregularities of the Teeth, with special reference to a Theory of Causation and the Principles of Prevention and Treatment.* By J. SIM WALLACE, D.Sc., M.D., L.D.S. London: The Dental Manufacturing Co., Ltd. 1904.

This volume contains a collection of essays which appeared originally in the *Journal of the British Dental Association*, 1900, and the *Dental Record*, 1901-3. The object of the author is to prove that the smallness of jaw supposed to be characteristic of civilised man is a condition individually acquired, dependent, not upon "civilisation" *per se*, upon natural or sexual selection, but upon elimination from the diet of the coarser and more fibrous materials necessitating considerable masticatory effort; the result being that, owing to diminution of nutrition due to muscular strain, the jaws of civilised man fail to reach their normal size, this failure bringing in its train all those forms of irregularity of the teeth which are due to overcrowding.

Great stress is laid upon a hypothecated diminution in the size of the tongue, from the cause mentioned above, as instrumental in bringing about corresponding diminution of the dental arches.

Dr. Wallace's arguments in favour of his views are well conceived and ably set forth, though perhaps brought forward with rather too much of an air of originality; for the action of the tongue and lips in modelling the dental arches has long been known and utilised by dental surgeons, while the association of fine arches of sound teeth with a diet consisting principally of meat and fibrous substances has been noted by many previously. A chapter on prevention of irregularities calls for commendation, though those on treatment are hardly full enough. On page 125 we are told that in certain forms of irregularity "it is absolutely necessary to diminish the size of the tongue," and are left wondering how this is to be accomplished by any means short of major surgery. Here and there the author rather ostentatiously attacks theories and methods of treatment now condemned as obsolete by the majority of practitioners. The book as a whole gives food for thought, and may be recommended to medical men interested in the subject, as well as to dental surgeons and advanced students.