what later, and the laryngeal disease was found to be malignant, although it had apparently healed on several occasions.

The President thought that while it was not well to wait too long for tracheotomy, it was always advisable to use iodide and mercury in the first instance if possible. Cases had occurred of rapid improvement by such means. In some cases the disease had been seated in the trachea, and a too hasty tracheotomy would only have complicated matters without giving relief. Replying to Dr. Hale White, he had found that the movement of the affected cord in a case similar to the one exhibited had been completely restored in course of time.

Dr. WILLCOCKS showed a case of Gummata of Epiglottis (?).

The patient, R. C., aged twenty-seven, a Covent Garden porter, had contracted a primary sore three years ago, followed by slight sore throat and erosions on edges of tongue. Rash on skin. Voice husky for last two and three-quarter years; affected shortly after primary sore.

Present condition: Epiglottis much thickened and irregularly nodulated; somewhat fixed; no visible ulceration; feels hard; view of interior of larynx imperfect; no enlarged glands to be felt under jaw.

Mr. Stewart referred to a similar case which cleared up under the use of iodide, but with occasional severe laryngeal spasm, necessitating the use of an anæsthetic. In another case the disease simply went from bad to worse, the iodide showing no result.

Dr. Bronner advised the use of mercurial inunction.

Dr. WILLCOCKS proposed to treat the case with iodide and mercury.

Obituary.

THEODOR BILLROTH.

THE greatest representative of German surgery has passed away. Theodor Billroth died on the 5th February, at Abbazia. Not only as physicians must we share the universal grief, but laryngology has to deplore the loss of a great surgeon, the originator of the greatest, most important, and most audacious operation in laryngology, viz., extirpation of the larynx. It is not necessary here to review the biography of the departed surgeon, which has been related in all the medical and political newspapers of the last few weeks, as well as his great influence on the development of surgery. We may restrict ourselves to the mention of his first operation of total extirpation of the larynx. In 1873, three years after the instructive experiments made on dogs by Czerny, Billroth tried without success the removal of a malignant neoplasm by thyrotomy, and then decided to remove the whole larynx. The patient was cured, and could speak with a loud voice by the aid of an artificial larynx. It was the first case of the great number of partial and total extirpations since performed by numerous surgeons. He thus created a

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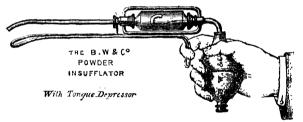
new era in the treatment of malignant laryngeal disease, and his name will be for ever connected with the history of our specialty. *Michael*.

[Though Billroth was the first to perform total extirpation for laryngeal cancer in 1873, Patrick Heron Watson, of Edinburgh, had already demonstrated the practicability of the operation, by performing it upon a patient in 1866, suffering from tertiary syphilis of the larynx, and it was not until seven years after this date that Billroth performed the operation for cancer. It is, therefore, to Watson, and not to Billroth, that the credit of bringing the operation within the domain of practical surgery must be accorded.—ED. JOURN. OF LARYN.]

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This is a very perfect little instrument, which we have found to be most useful in practice. To those who make much use of insufflations it would seem to be indispensable. It is handy and neat, and a vast improvement



upon all other forms of insufflator. The advantage of interchangeable cylinders, ready charged with the different powders commonly used, is obvious. The instrument is illustrated above, and we cannot too highly praise it. We do not, however, see much advantage in the "furcate tube"; but the tongue depressor is at once a useful and necessary part of the



instrument. Like many of the smaller appliances introduced by this eminent and enterprising firm, this insufflator is a wonderful improvement upon anything of the kind we have ever met with.

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