

NOSE AND NASO-PHARYNX.

Guthrie, Thomas.—**The Recurrence of Adenoids.** "Lancet," April 20, 1912, p. 1054.

The author describes a case in which the recurrence of adenoids appears indisputable. A photograph shows the original mass removed at three years of age, and the second growth taken away eighteen months later. The remarks made by the author are very sensible.

Macleod Yearsley.

Onodi, Prof. (Budapest).—**The Opening of the Cranial Cavity and Exposure of the Brain from the Accessory Sinuses of the Nose.** "Zeitschr. f. Laryngol.," Bd. iv, Heft 1.

The article is full of statistics as to the height, breadth and depth of the frontal and other sinuses. Radiograms show that these sinuses are absent on both sides in 5 per cent. of cases. Prof. Onodi has carried out 1200 X ray examinations of the accessory sinuses, and gives illustrations showing the appearances presented when the frontal sinuses, as outlined by the X rays, are projected on the frontal lobes of the brain; in some cases they may come into relation with the temporo-sphenoidal lobes. The writer also gives directions for exploring the brain after removal of the posterior sinus wall.

J. S. Fraser.

Sieur and Rouvillois.—**Report on Surgical Treatment of Frontal Sinus: a Critical Study of Post-operative Complications.** "Arch. Internat. de Laryng., etc.," July–August, September–October, 1912.

In the report the authors have had above all in view to show that the importance and number of indubitable post-operative complications in the surgical treatment of these affections has been singularly exaggerated. In the first chapter they study the evolution of frontal sinus surgery, an evolution to which French specialists, and particularly Luc, have usually attributed much importance. It is a sort of critical review of all the methods which have been successively employed, and by which one can render account of the progress realised from the surgical and therapeutic point of view. In the second chapter are grouped together the observations of the principal complications imputable to surgical intervention, hæmorrhage, orbito-ocular accidents, osteomyelitis, thrombo-phlebitis, and septic pyæmia, meningitis, and cerebral abscess. These diverse complications, of which the start shows in many cases a period of origin anterior to the operation, evolve more readily under predisposing causes. The third chapter is devoted to these causes. The authors range under two principal headings: (1) Predisposing cause inherent to the patient; surroundings, age, sex, general state and induced local conditions; (2) predisposing causes inherent to the operator in the execution of the operation. Among the first that of most importance should be attributed to the general state, chronic infections, syphilis, infectious maladies, etc., to the anatomical formation of the affected sinus, the extent of its lesions, and the virulence of the causal organisms. The fourth chapter is devoted to the consideration of post-operative infection. This method of infection is peculiar owing to the anatomical conformation of the frontal sinus and the importance of its relations. But after having successively passed in review the propagation of inflammation by continuity, by veins and lymphatics, the authors come to the conclusion that the veins play the most important part *role* in this connection. This

is in agreement with more recent anatomical research and clinical observations. The study of post-operative procedures and of the likely and predisposing causes of post-operative complications and the discovery of the ordinary method of infection should assist us to means of avoiding these complications. These means are found, according to the authors, in the judicious choice of the operative method, in the preparation of the patient, and in the performance of the operation. The most important point of this stage, which constitutes the fifth and last chapter, considers specially the employment of the endo-nasal method and the practice of trephining by the external route according as one finds himself in the presence of an acute sinusitis, of pan-sinusitis, or of a spreading cranial osteomyelitis. The authors sum up their work by drawing the following conclusions: (1) Let us be clear-sighted clinicians in our general and local diagnosis, and perform operations proportional to the resistance of the patient and the extent of the lesions. (2) Let us be eclectic surgeons without pinning ourselves to a systematic procedure, but doing all that is necessary and no more. (3) Let us be prudent and painstaking operators, and we will avoid the dangers inherent to intervention. Although we cannot hope ever to entirely be free from post-operative complications, such cases would exist as isolated exceptions. The treatment of frontal sinusitis should not make an exception to those of other affections which would necessitate the aid of surgery. We should add, nevertheless, that owing to the difficulty of treatment inherent to the anatomical situation of the sinus, frontal sinusitis ought always to be considered as a serious affection. This is why the authors consider that they cannot do better than terminate their conclusions with the words of Gerber, that "insufficiently experienced operators should withhold their hand." Rhinology should keep itself well abreast of the practice of modern surgery. This condition is necessary to our speciality in order that it can pretend to an independent place among the other branches of surgery.

J. D. Lithgow.

E.A.R.

Hammond, P.—A New Mastoid Retractor. "Boston Med. and Surg. Journ.," June 27, 1912, vol. clxvi, No. 26.

The instrument may be used in combination with a tape passed through the meatus, or alone. It is self-retaining. It consists of anterior and posterior members, which resemble Volkmann's retractor, and when in use are placed within the corresponding margins of the wound. The connecting portion between the two members is shaped like a "wish-bone" and is reversible, allowing the instrument to be used for either ear, with this portion either above or below the operative field.

Knowles Renshaw.

Mahler, L. (Copenhagen).—On the Pathological and Clinical Aspect of Otogenous Aseptic Sinus Thrombosis. "Monats. f. Ohrenh.," Year 45, No. 11.

With a brief review of the only nine cases of this nature which he had been able to discover in the literature up to date, the author gives the following account of a man, aged sixty-seven, who came under his care April 17, 1911. The patient had had no affection of the ears till two months previously, when he caught cold, which was accompanied by pain in the right ear and a purulent discharge. For this he was treated in hospital and discharged fourteen days previously, since when he had been