

Dr. LEE said that deaf-mutes were sometimes classified by alienists with degenerates, but the sections they had just seen supported their own contention that deaf-mutes were in all other respects normal individuals. Some of them, indeed, were very intellectual. To classify them with degenerates and on that account to refuse them education was therefore highly improper.

Dr. ALBERT GRAY, in reply, expressed his agreement with Prof. Urban Pritchard that the outgrowth on the stria vascularis closely resembled the tegmentum vasculosum of birds. It was possible that in the development of the human labyrinth a stage was traversed in which such a process formed. But in ontogeny a stage like this may be slurred over with such rapidity that it may escape notice, unless by good fortune it is accidentally hit. And it was possible that the disease process had set in at just such a favourable moment, stereotyping this outgrowth for the rest of the individual's life. That the depression of the membrane of Reisner was pathological and not artificial was shown by the fact that in the lower cochlear whorls the membrane was adherent to the organ of Corti. These sections showed that deaf-mutism was generally due to a labyrinth lesion, and not, as neurologists in the past had maintained, to a central defect.

DEMONSTRATION OF HAY'S PHARYNGOSCOPE.

BY DR. W. MILLIGAN.

The particular advantage of the instrument is that it can be used in patients who are so ill that they cannot tolerate an examination with the ordinary throat mirror.

Dr. H. J. DAVIS observed that when using the instrument the uvula sometimes came down and hid the larynx. This difficulty could be got over by making the patient open the lips a little.

Abstracts.

MOUTH.

Samenhof, L. (Czyste).—*A Case of Acute Idiopathic Osteomyelitis of the Superior Maxilla.* "Arch. für Laryngol.," vol. xxii, Part II.

The case here reported is of great rarity, only three examples of primary necrosis of the superior maxilla having been previously recorded. The onset of the disease was sudden, with high fever, and the patient, a boy, aged three, was apparently in good health at the time. There was no suspicion of syphilis or tuberculosis. Two months after the beginning of the illness the case first came under the writer's care, and a loose sequestrum which involved the entire alveolar process of the right superior maxilla from the first molar backwards was removed. A second smaller sequestrum was removed a few days later. Careful examination showed that the antrum of Highmore was not involved. On the seventeenth day the wound was completely healed. In only one of the three cases which occur in the literature did death occur; in the other two healing quickly followed removal of the sequestrum.

Thomas Guthrie.