

nearly symmetric thickenings of the vocal bands in the region of the posterior vocal processes, with central longitudinal depressions in the tumid masses. He discusses the views of Virchow and of B. Fränkel as to its pathological histology, and recognizes the difficulties in its discrimination from other lesions. The question of alcoholism and cantatin advanced by Virchow as concurrent etiological factors is not broached in this paper. The main interest of the case lies in the production of the characteristic indentation while the patient was under observation.

MULTIPLE SARCOMA OF LARYNX AND TRACHEA.

PROFESSOR SCHNITZLER has reported (*Wiener klin. Woch.*, No. 23, 1889) a case in which symptoms of disease had been but a few weeks in progress. There was right-sided infiltration of the laryngeal surface of the epiglottis and marked and uniform tumefaction of the right ventricular band. This tumefaction was destroyed with the electric cautery. A tumor, larger than a hazelnut, was then discovered below the left vocal band, and subsequently a similar one in the right wall of the trachea. Microscopic inspection of fragments cut for the purpose from the infiltrated epiglottis, and the remnant of ventricular band revealed round-celled sarcoma.

A few days later deep tracheotomy was performed by Professor Frisch, who removed from the trachea five or six neoplasms varying in size from lentils to large hazelnuts. The tumors above the glottis were then entirely destroyed with the electric cautery, and the patient was regarded as cured. Professor von Frisch stated that after performing tracheotomy just above the jugular fossa and inserting a tampon canula, he split the trachea open from the cricoid cartilage. The anterior wall was free from tumors. Two growths about the size of hazelnuts were found laterally; none on the left side of the cricoid cartilage and the first ring of the trachea; the other, on the right side lower down. Still lower there was a group of five smaller growths in the neighborhood of the fifth to the seventh cartilages, rather loosely attached to the mucous membrane and in the posterior and lateral walls. All the tumors were removed by scraping, and their bases were scorched with the thermo-cautery. The canule was removed on the fourteenth day.

TUBERCULOSIS OF THE LARYNX.

In a paper read by PROFESSOR H. KRAUSE, of Berlin, before the last Congress of the German Medical Association (*Therap. Monats.*, May, 1889) he summarizes the results of the treatment with frictions of lactic acid introduced by him in 1885. For a long time, he has rarely used lactic acid in stronger solution than 50 per cent.; whereas, formerly, he used it in much stronger solution, 80 per cent., and even occasionally undiluted. His experience, after four years' use of lactic acid, has remained the same as announced in his initial paper. The results are satisfactory in the majority of severe cases, sometimes remarkably prompt and happy. Some of his patients have remained cured for more than two years. In two of those who had had deep ulceration, recurring lesions did not take place for more than two years. He acknowledges that cures are not always thorough in a purely anatomical sense. He has frequently found

on post-mortem examination of patients whose larynges had shown complete cicatrization laryngoscopically, that ulcerated ulcers were found in locations difficult of reach, such as the ventricles, and the lower cavity of the larynx. The lack of cure in these instances, however, are to be attributed to the inaccessibility of the lesion, and not to the inefficiency of the remedial agents. Curetting, as advised by Heryng, previous to the use of the lactic acid, is indicated in the presence of thick bordered ulcers and extensive infiltration.

The accessible lesions most difficult to manage and the worst in prognosis are infiltrations of the epiglottis. Swellings in the lingual surface of the epiglottis are to be combated by treating the ulcerations and infiltrations of the laryngeal surface to which they are most usually due.

In curetting, Krause now uses a double curette of his own construction, a description of which does not appear in this article. It is probably a cutting forceps.

A few typical cases are reported in some detail.

DERMATOLOGY.

UNDER THE CHARGE OF

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ON PAGET'S DISEASE OF THE NIPPLE.

Recent observations have led DARIER to believe (*British Medical Journal*, June 1, 1889) that Paget's disease is a form of cutaneous psorospermiosis. Examinations of the epidermic scales and sections of skin from the affected area, properly prepared, disclosed the presence of round bodies, which were, according to the writer's opinion, undeniably psorospermia or conidia. Similar bodies, it is well known, have been found in other cases of epithelioma. It is probable, the author states, that Paget's disease of the nipple is caused by these parasites.

TREATMENT OF PURPURA HÆMORRHAGICA BY NITRATE OF SILVER.

In the especially grave variety of purpura hæmorrhagica which POULET describes as the "asthenic" form (*Bull. générale de Thérapeutique*, May 3, 1889), he has found in a number of cases that the administration of nitrate of silver has acted as a specific, and in a surprisingly rapid manner. The notes of two of these cases are given, in which symptoms of an alarming character were