

vegetative nervous system analysis of the mechanisms involved. In ten there was a tendency to spasm of the esophagus.

Link, G. PRELIMINARY THYROID OPERATIONS. [Journal of the Indiana State Medical Association, March 15, 1919.]

Two procedures to be employed in cases of thyrotoxicosis in which thyroidectomy would endanger the patient's life, are here described. One is injection of boiling water into the gland, the other ligation of the thyroid arteries. The injection of boiling water into the gland destroys a portion of the secreting substance and thus reduces the amount of thyroid secretion and the toxicosis. The chief objection to the method is that subsequent thyroidectomy is extremely difficult as the gland is held solidly in the neck by adhesions and the hemorrhage is severe. Its use should be limited to those cases in which we never expect to be able to do thyroidectomy. His technic for boiling water injections is as follows: With local anesthesia a horizontal incision one inch long is made through skin and platysma in the middle of the line of the regular incision for thyroidectomy. The gland is uncovered on each side over as great an area as possible by blunt dissection. Two or three injections of boiling water, one half to one ounce each, are made into each side, one in the middle of the lobe and one toward each pole. The syringes are taken out of the boiling water and the injection done as quickly as possible so as to get the full effect of the heat. To facilitate the handling of the hot syringes three pairs of gloves are worn, rubber, chamoisette, and rubber. Glass syringes with asbestos plungers are best. At the instant when the boiling water is injected there is pain; this may be obviated by a few inhalations of gas.

Rondoni, P., and Bellini, A. EPIDEMIC OF GOITER. [Riv. Crit. d. Clin. Med., March 15, 1919. J. A. M. A.]

Rondoni and Bellini relate that goiter suddenly appeared in a district near Florence where its endemic presence had not been previously known. Eleven of those affected were given ten drops of tincture of iodine daily, and three were treated with salol and benzonaphthol, each 2 gm. per day and later with 1 gm. of thymol. This intestinal sterilization did not show any effect on the goiter, while in all those taking these small doses of iodine the goiter retrogressed, and in some completely disappeared. No factors could be discovered which could be regarded as responsible for the novel epidemic. The authors expected to find it in iodine growing plants but apparently paid no attention to psychogenic factors, which are invariably found in hyperthyroid states.

McCaskey, G. TESTS FOR THYROTOXICOSIS. [Am. Med. Assoc. Medicine Section, Med. Record, June 21, 1919.]

The present status of the study of thyroid disease, he said, was what the study of diabetes would be without laboratory data. Often in