developments. 4. It is also worthy of mention that these extensive growths were all removed endo-laryngeally, a procedure the feasibility of which was doubted by one of our distinguished New York laryngologists, Dr. J. W. Gleitsmann, who saw the case before I did.

I regard the endo-laryngeal operation as the ideal one in these cases, and can scarcely conceive of a case of papilloma of the larynx justifying thyrotomy. In operating, I prefer the snare to any other instrument for the reason that the growth can be removed more accurately, more thoroughly and with far less injury to the surrounding healthy parts. The latter is most important, for it is the common observation of laryngologists that recurrences are more apt to spring from those portions of the larynx that have been injured during the operative procedures than from the bases of the primary growths.

In conclusion I wish to state that the gentleman to whom I referred as having seen the case, Dr. Gleitsmann called up just before I left home and expressed regret at not being able to attend the meeting. He desired me to state to the Section that this was one of the most unusual cases of papilloma of the larynx he had ever seen, and that he had not seen a case of fungoid papilloma of the larynx for several years. Personally, he considered it a case for thyrotomy, and expressed much satisfaction that the growth had been removed by endo-laryngeal means.

The Sajous snare is preferable in these cases, for in removing the growth from the larynx the wire loop presses against the groove on the tip and holds the papilloma, preventing it from falling into the trachea. The growths in the commissures were removed by means of the Krause laryngeal cutting-forceps.

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Acute Otitis Media—Its Causes and Treatment. R. EVATT MATHERS, *Maritime Med. News*, Sept., 1910.

The writer condemns the use of unsterilized oils, laudanum, onion cores, etc., as possessing no therapeutic value, and being favorable to bacterial growth. Moist heat is also condemned as softening the tissues and hastening local necrosis. WISHART.