boy, æt. 15, received a violent blow on his head with a heavy iron rod. When brought to the Mariinsky Hospital shortly afterwards, he was quite conscious. In the left temporal region of the frontal bone there was found a scalp wound, $4\frac{1}{2}$ cm. long, leading down to a fissure in the skull, from which lumps of a bruised brain-substance were seen escaping. A half an hour later, the boy was brought under chloroform, and the scalp wound enlarged. A gaping fracture, about 4 millimetres broad, presented itself, through which a lacerated wound of the dura mater, measuring $1\frac{1}{2}$ inches in length, could be seen. Having widened the gap in the bone with a chisel, Dr. Praksin removed several depressed fragments, as well as blood clots and brain-detritus, washed out the wound with an antiseptic solution, plugged the cavity in the brain with iodoform gauze, covered the skull-contents with six layers of the gauze, bringing the latter well under the edge of the skull-opening, and then applied an antiseptic dressing over the whole injured region of the head. The progress of the patient was quite normal. On the 14th day the boy got up. On the first change of the dressing, consisting of iodoform gauze, salicylic cotton wool and tow, on the 21st day, the cutaneous wound was found to be luxuriantly granulating, and on the second change, four weeks later, the dura mater proved to be also covered with granulations." The lesion healed completely in *four months*. No explanation is given of the slow progress of the healing process. No cerebral symptoms of any kind were observed at any stage of the case.—*Vratch*, No. 49, 1887.

VALERIUS IDELSON (Berne).

IV. Case of Traumatic Cephal-Hydrocele. Spontaneous Cure. By F. A. SOUTHAM (Manchester). Male child, æt. 6 months, fell down stairs. Fracture running obliquely across parietal and occipital region on the right side. Fourteen days afterwards a swelling was noticed over seat of fracture, oval, soft, fluctuating and pulsating.

Moderate pressure was applied with a pad of lint and a bandage.

In a month the swelling entirely disappeared and the child seemed all right, though there was still a marked depression in the bone along the line of the fracture. An illustration is given and references to

Clement Lucas, *Guy's Hospital Reports*, 1876, and Connor, *American Journal of the Medical Sciences*, July, 1884.—*Brit. Med. Jour.* May 12, 1888.

C. B. KEETLEY (London).

V. Cocaine in Tonsillitis. By DEHAVILAND HALL, M.D. (London). Dr. Hall quotes several cases of acute parenchymatous tonsillitis to show the value of local painting with a 20% solution of cocaine which relieves dysphagia promptly, and seems to diminish the tendency to suppuration. It is not wise to use the solution in the form of a spray on account of occasional alarming syncopal attacks, but it is well to spray the throat with solution of bicarbonate of sodium (10 grains to the ounce) before applying the cocaine, as the latter appears to act more efficaciously in presence of an alkali. Cocaine is not useful in the follicular form of tonsillitis.—*Lancet*, May 19, 1888.

VI. Laryngeal Paralysis from Acute Laryngitis. By PERCY KIDD, M.D. (London). At the Clinical Society meeting on May 11, Dr. Kidd described the laryngoscopic appearance and the symptoms in a case of complete bilateral paralysis of the vocal cords due to acute laryngitis and passing away when the latter was cured in three weeks time. There was considerable dyspnea. Dr. Kidd attributed the paralysis of the laryngeal muscles to inflammatory infiltration of the intra-muscular filaments of the recurrent laryngeal nerve, and compared the affection to the ordinary palsy of the facial nerve from cold.—*Lancet*, May 19, 1888.

A. F. STREET (Westgate).

VII. The Conditions following Tracheotomy for Diphtheria and Croup in Children. By DR. ROBERT JENNY (St. Gallen). This paper contains a consideration of 214 tracheotomies performed in the Canton Hospital Munsterlingen from 1873 to 1886. The ages of the children ranged from one year or under to the 17th (1) and 21st (1) year of life. It appears that all under the age of one year died (3). The percentage of recoveries is 44%. In 88% of the cases the disease was diphtheria, the membrane, in most instances,