CORRESPONDENCE.

HAMILTON, SCOTLAND, September, 1901.

EDITOR THE LARYNGOSCOPE :

At the end of an interesting paper by Dr. Jonathan Wright, in THE LARYNGOSCOPE of June, which has recently come to my notice, two cases are mentioned as being of epileptic nature and as naso-pharyngeal reflexes, resulting from palpation pradenosis. There was a slight convulsion in both cases. It may not be too late to call in question the epileptic nature of these attacks or the wisdom of dignifying them by the name of naso-pharyngeal reflex, and to ask whether they are not simply cases of fainting. It does not seem sufficiently recognized that a fainting attack often begins with a slight cry and a slight convulsion, as, indeed, one would expect in comparatively sudden cerebral anemia. I have repeatedly seen this happen both as the result of nasal interference and some slight surgical operation elsewhere. The cry or groan, the slight convulsion and the sudden unconsciousness give a superficial but striking resemblance to epilepsy, which, there is some reason to think, at one stage of the fit also involves cerebral anemia, but with which there is no further connection unless it be "neurotic temperament." [Dr. Leonard Hill has shown how sudden cerebral anemia produced by ligature of the cerebral arteries causes spasm.]*

One of my cases was an asthmatic, aged fifty, who had an attack similar to that described by Dr. Wright. The first time I interfered with his nose during cocainization and examination there was a groan, twitching of the face and the patient fell to the ground unconscious. He had not had enough cocaine to cause this and subsequently bore much larger doses, and as he gained confidence,

* Proceedings Royal Society, June, 1900

prolonged operative procedure without fainting. Another case, which might have been described in Dr. Wright's own words, happened during the incision of an abscess in the hand of a sturdy young man. There is no history of epilepsy or anything like it in either case, before or since, and there is, according to Dr. Wright, none in either of his cases. All are cases of fainting and are interesting as a clinical parallel to Dr. Hill's experiments. The three associated with nose and pharynx are not nasal or nasopharyngeal reflexes any more than the other is a hand-reflex.

I remain, yours truly,

JAMES HAMILTON, M. D.