

Carcinoma of the Pharynx with Marked Involvement of the Cervical Glands in a Boy Fourteen Years of Age—T. M. ELDER

—*Montreal Medical Journal*, December, 1900.

Carcinoma of the pharynx is, so far as surgical literature shows, a rare disease, and the age of this patient makes this case even more remarkable. The patient sought operation for enlarged cervical glands, supposedly tuberculous, and gave the following history. The trouble began twelve months before as a stiff neck, followed shortly by a lump near the angle of the right jaw, which became as large as a hen's egg. The boy had had enlarged tonsils, and sleeps with mouth open, snoring badly; is thin, and losing flesh rapidly; the glands are enlarged around the right sternomastoid, and to a less degree around the left; the glands are hard and nodular; firmly fixed, not painful and with no tendency to break down; speech is nasal; temperature is normal. Mother died of hepatic cancer. Examination showed some naso-pharyngeal growth and relaxation of the palate, but the fixation of the jaws prevented further examination.

Under anesthesia, a large mass of indurated gland tissue on the right side of the neck was removed—the glands shelling out easily. All the structures were involved and infiltrated by the neoplasm, which cut like cartilage. There were a few small cysts in the mass, but no hemorrhagic spots. The linear incision closed and healed rapidly. The neoplasm proved to be carcinoma of the scirrhus type. Subsequently a small piece of the growth in the pharynx was removed, and it was then found that most of the vault of the pharynx was involved, with no tendency to pedunculate. This proved to be typical scirrhus carcinoma. Nothing farther was attempted. The boy was four years old when his mother died.

GIBB WISHART.

Tonsillitis—A. SANDNER—*Medical Summary*, December, 1900.

A very clever classification of tonsillitis is given by the author. viz.:

- I. Toxic tonsillitis, without any macroscopic visible exudate.
 - (a) Rheumatic tonsillitis.
 - (b) Catarrhal or influenzal tonsillitis.
 - (c) Tonsillar inflammation in connection with infectious diseases, scarlatina, measles, etc.
- II. Infectious tonsillitis, with exudate.
 - (a) Follicular tonsillitis.
 - (b) Diphtheritic tonsillitis.
- III. Suppurative tonsillitis.
- IV. Irritative or chronic tonsillitis.

The author describes in detail the well-known symptoms of above classifications.

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