bolized glycerin, one in twenty, as suggested to him by Mr. Lowe, of Bath, in preference to antiseptic injections which could not act thoroughly before the mastoid opening was made and tended to drive inward, without removing, septic agents and products confined in the bony cavity.

DR. WILLIAM MILLIGAN, of Manchester, advocated opening the tympanic attic, and its exploration in cases of chronic suppurative middle-ear disease at the same time that the antrum was opened. The attic offers such an admirable space for the production and propagation of septic material that it should be the surgeon's aim to clear it thoroughly of all its putrid contents.—*British Medical Journal*, vol. ii., 1893.

[So true is this that it is highly probable that many cases of antro-mastoid suppuration could be prevented by an early removal of diseased ossicles in chronic suppuration of the middle ear, especially of the attic.—REP.]

THE TREATMENT OF ENCEPHALIC ABSCESES CONSECUTIVE TO SUPPURATION OF THE EAR.

A. BROCA (*Gazette hebdomadaire de Médecine et de Chirurgie*, Année xl., No. 38) under this title gives a general review of this subject from the time of Lebert down to the present time. After considering at some length the opinions of Barker, Stoker, Bergmann, Hare, J. Lloyd, Macewen, MacBride and Miller, Chauvel, Gull and Sutton, Krishaber, Pitt, and others, he says: "Being given a chronic suppurative otitis media, accompanied with cerebral symptoms not well determinable if there is a mastoid fistula or symptoms of mastoiditis, it is necessary to perform generous trepanation of the mastoid and of the tympanic cavity. The same thing should be done even when the mastoid region appears normal externally, for sometimes an unsuspected retention of pus will be found in it which causes the symptoms, and also because, if it is necessary to go further, the mastoid path is the best way of proceeding."

OSTEOPLASTIC OPERATIONS ON THE SKULL, WITH REPORT OF A CASE OF CEREBRAL ABSCESS FOLLOWING OTITIS MEDIA CURED BY OPERATION.

DR. BRENTANO, in *Allgemeine medicinische Central-Zeitung*, No. 26, gives an account of a brain-abscess in a patient who had suffered from otorrhœa since childhood. Lately, following a cessation of the discharge, headache, constriction of the head, stiff neck, irregular pulse, somnolence, and tenderness of the occiput manifested themselves. The mastoid process was opened, and its cells found to be in a state of suppuration. After removal of the pus the dura was exposed and found to be black in color at the upper part of the cavity. As only temporary improvement occurred, another endeavor was made to find the suspected abscess beneath the discolored dura mater. At this point an abscess was discovered and emptied. Undisturbed recovery then took place.

TREPANATION FOR ABSCESS OF THE BRAIN.

TERRILLON communicates the history of a case of trepanation undertaken or relief of an intra-cranial abscess consecutive to chronic suppuration of the ear. The operation was performed eighteen months before it was reported,