NEW INSTRUMENTS.

A PRACTICAL OZONE INHALER.

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In the October issue of the *JOURNAL* there is described "A Scientific Ozone Inhaler," by Dr. Cyrus Edson of New York City. Ozone is a useful remedial agent, which has been used to advantage in many pathologic conditions, but the apparatus described is not a conservative method of generating this gas, as but a small portion of electric energy is utilized for this purpose. It compares with the *scientific* method of generating ozone very much as the heating capacity of a single steam-pipe does with that of a modern steam radiator.

The most economical and practical method of generating ozone is by means of the ozonizer first described by Siemens, and which I have used in the treatment of diseases of the nose, throat and ear for some years, and described in the *Journal of Laryngology*, London, July, 1897.

This apparatus consists of a kind of Leyden jar, which is prepared by coating the interior of a glass tube with tin foil and passing over this a second wider tube, also coated with tin foil on its outer surface. Between the two tubes a current of air or oxygen is passed which becomes electrified by induction,

the inner and outer coatings of tin foil resectively being connected with the terminals of a strong induction coil or static machine. By this mean it is possible to convert 10 or 15 per cent. of oxygen passed through the tube into ozone, which is more than twenty times the efficacy of the ordinary disruptive discharge, which is the method used in Dr. Edson's apparatus.

In the description of Dr. Edson's apparatus, it is specified that a static machine should be used to generate the electricity. An induction coil with a capacity of a six-inch spark is equally effective and can be used without correcting the hygrometric conditions of the atmosphere, as is usually necessary with the static machine. The method by means of which the ozone is applied in diseases of the maxillary sinuses is shown in the accompanying illustration.

A NEW LIGHT-SCREEN.

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This is made by attaching an iris diaphragm to an asbestos chimney. The amount of light passing through the opening

in the diaphragm is controlled by an ivory-tipped lever at the left-hand side. An index at the periphery records the diameter of the opening in millimeters, from one to thirty.

When using the Maddox rod for muscle testing, the light streak can be made thread-like, or very broad, by regulating the size of the opening in the diaphragm.

While this screen may be of use in otology, laryngology, and in general ophthalmology, yet it is primarily for retinoscopy; simplicity and great convenience in controlling the amount of light being it points of merit.

To Messrs. Wall & Ochs I am indebted for their careful workmanship and skill in making a diaphragm the leaves of which are not affected by the heat.

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