more favorable in pregnancy. The treatment is that of nephritis. Sometimes lumbar puncture is advisable. The injection of milk is strongly condemned.

Ginestous. CONGENITAL PARALYSIS OF THE RIGHT EXTERNAL RECTUS. [Gaz. hebdomadaire des Sciences Médicales de Bordeaux, February 15, 1920.]

A girl, aged seven months, showed complete internal strabismus of the left eye. Ophthalmoscopic examination revealed slight hypermetropia, but no lesions were detected in the fundus. The infant's heredity and personal history were excellent, and no other abnormalities were present. Functionally strabismus could be excluded, and the condition was therefore congenital, being due to absence of the muscle, a vicious insertion, or a congenital abnormality of the centers of the external rectus.

Grant, Francis C. ANATOMIC STUDY OF INJECTION OF SECOND AND THIRD DIVISIONS OF TRIGEMINAL NERVE. [J. A. M. A., March 18, 1922.]

Injections into the second and third divisions of the nervus trigeminus have become a common procedure. The descriptions in the literature which various writers have given of the technic of injecting these two divisions of the fifth nerve may seem precise, when read, but are disappointing in their practical application. Any attempt to reach a nerve trunk lying deep beneath the skin, and emerging from bony orifices in the skull, requires definite landmarks and angles as guides to the approach. In the clinic with which Grant is connected, a zygometer is used, which helps in great measure to determine accurately the point on the face at which the needle should be introduced to reach a particular nerve trunk. Using this instrument to standardize the points of insertion of the needle through the skin, the angles in the horizontal and vertical plane through which the needle must pass from this fixed surface point to enter the nerve trunk have been worked out. The details are given.

Turner, A. L. PARALYSIS OF THE VOCAL CORDS. [Journal of Laryngology and Otology, August, 1921.]

During twelve years this observer has seen six patients suffering from paralysis of the vocal cords due to pressure on the recurrent laryngeal nerve as the result of glandular enlargement consequent on malignant tumor of the breast. In each instance the breast and the axillary glands on the side of the tumor had been removed. In one case the condition was a melanotic sarcoma, in the others a scirrhus cancer. Hoarseness developed at varying periods after removal of the tumor, after eight months in the case of the sarcoma and after an average of three and a half years in the others. The paralysis was homolateral (right) in four cases, including that of the sarcoma, and contralateral in two cases. In the scirrhus cases the supraclavicular lymphatic glands

were found secondarily involved at the time of the laryngeal examination, occurring homolaterally in four cases and contralaterally in one. In the case of the sarcoma no glands were palpable. Turner shows that the supraclavicular glands form an important link in the lymphatic chain, along which the cancer cells disseminate, and that in all probability they do not exert pressure directly upon the recurrent nerve in the neck.

Chance, B. NEUROPATHIC KERATITIS. [Arch. of Ophthal., November, 1920.]

A man, aged forty-five, suffered from keratitis. He had had left-sided trigeminal neuralgia and resections of the supraorbital and infraorbital nerves had been performed without relief. Alcoholic injection into the Gasserian ganglion had been done and for two years he was free from pain. The cornea was edematous, without brightness and pervaded by fibrillary scars.