

which to use it. I have not been fortunate enough to come upon any cases of hemophilia upon which to try it, but hope that there will be a good use for it.

It keeps very well, and there is no reason why it should not keep in a dry state, for pepsin and any of the enzymes keep in a dry state. That is also an important point for it will probably not deteriorate on being kept.

210 East Sixty-Fourth Street.

Contribution to the Study of Cysts of the Frontal Sinus. HENRI
ABOULKER. *Rev. Hebdom. de Laryngol. d' Otol. et de Rhinol.*,
Oct. 29, 1910.

Aboulker collates 13 cases from which he draws the following conclusions: The etiology of muco-cele is not easy to elucidate. It has been variously attributed to traumatism, infection reaching the sinus, and narrowness of the frontal sinus. Some cases are not explained by any one of these reasons. It appears more simple to attribute these cysts to retention in one of the glands of the sinus mucosa, with cystic dilatation resulting in perforation of the inferior wall of the frontal sinus, or, more rarely, of the septum. Occasionally it causes perforation of the cranial wall.

The symptomatology comprises an obscure period of evolution within the sinus, manifesting itself in vague headaches or neuralgic pains. Later the muco-cele gives more distinct external signs, such as protrusion of the eye and dilation of the base of the nose. The diagnosis before perforation, appears to the author to be impossible except in cases where an intermittent and uni-lateral mucus is discharged.

Aboulker concludes by giving the differential diagnosis of muco-cele from affection of the lacrimal sac, dermoid cyst, fibroma and sarcoma of the internal angle, meningo-cele, sinusitis with abscess and ethmoidal muco-cele.

The treatment is simple. The cyst is exposed and carefully resected and curetted. The wound is allowed to heal by first intention, without external drainage, after a large and complete establishment of a fronto-nasal opening.

W. SCHEPPEGRELL.