

awkward position of the patient, is certainly preferable to the older method. In this spirit I ask my colleagues to try this method of posterior rhinoscopy.

Berlin.

## Clinical Notes:

### MEDICAL, SURGICAL, OBSTETRICAL, AND THERAPEUTICAL.

#### NOTE ON SULPHONAL.

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THE following case of insomnia treated with sulphonals may be of interest. The patient was a single lady of seventy-two, who had five months previously suffered from cerebral hæmorrhage. She was the subject of severe lateral curvature, but up to the time of her seizure had enjoyed fairly good health. The attack left paralysis of the right arm and leg, with slight aphasia. During the first three months she improved in health, and the leg became decidedly stronger. Then, in consequence of a fall, there was a fracture of the eighth rib on the right side close to the spine, and the arm became contracted and the hand swollen, painful, and deformed. At the same time, the mental powers (which had never quite returned after the first seizure) began to fail more decidedly. The patient became drowsy during the day, restless at night, and less intelligent. Bromides had been from time to time given before this with or without chloral, and small doses had induced sleep, a mixture containing carbonate of ammonia being taken during the day. The bromide was now pushed, but, causing great drowsiness and depression in the daytime, had to be omitted. Sulphonals were then tried, at first in ten-grain doses, which did not answer, then in fifteen-grain doses, which were uncertain in their action. Twenty grains taken an hour before the ordinary bedtime answered well on several occasions, and appeared to cause less drowsiness in the day than the bromide; but the patient was apt to be very talkative and restless on the following day and night, even if the sulphonals were again taken. On one occasion twenty-five grains were taken, but not continued as the patient began to sink, and died six months after the first attack. She was bedridden the whole time, and suffered frequently from diarrhoea or constipation, which readily yielded to mild remedies. There was no albuminuria, but the urine was usually about sp. gr. 1010 and acid. Towards the end there was urinary incontinence.

Finsbury-circus, E.C.

#### OPIUM POISONING.

BY H. R. BRAMWELL, M.B., C.M. EDIN.

THE following notes of a case of opium poisoning in an infant are perhaps worth recording. On Nov. 9th I was called in to an infant, aged three months, and found it semi-comatose, with pin-point pupils. The mother had given it a teaspoonful of laudanum about an hour previously, in mistake for the child's medicine, and the characteristic symptoms had come on rapidly. Vomiting had occurred shortly after the dose was taken. I ordered strong coffee to be given immediately, both by mouth and per rectum, and injected subcutaneously two minims and a half of the liquor atropiæ sulph. (B.P.), equal to a fortieth of a grain of sulphate of atropia, and directed that all possible means should be used to keep the child awake all night. I failed to produce emesis after giving ipecacuanha, mustard-and-water, and tickling the throat. By the evening of the next day the infant had quite recovered from the effects of the drug. I may add that for several days previously the mother had been surreptitiously administering small doses of laudanum to keep the infant quiet, and possibly, therefore, the overdose was tolerated better than it would otherwise have been. Doubtless also the major part of the teaspoonful was vomited shortly after being taken.

Stapleford, Notts

### ON THE SIGNIFICANCE OF PERFORATIONS THROUGH THE ANTERIOR PILLARS OF THE FAUCES.

BY WALTER FOWLER, M.A., M.B., F.R.C.S.,  
PATHOLOGIST TO THE CENTRAL LONDON THROAT AND EAR HOSPITAL.

WHILE examining throats, more especially of those who seek relief from deafness and otorrhœa, one not infrequently observes perforations through the anterior pillars of the fauces. In the majority of cases these perforations are bilateral and symmetrical; less commonly they are bilateral and asymmetrical, occasionally unilateral; and always free from adhesions or contractions. Taken by themselves, it is admitted on all hands they afford no evidence of syphilis (congenital or acquired); they are generally considered as congenital deformities. This view I feel sure is erroneous; for if the margins of the perforations be carefully examined cicatricial tissue can be made out, thus showing them to be due to ulceration. Further, corresponding to the perforation there is always more or less loss of tonsil, and from the anatomical disposition of the parts it is easy to understand how a perforation through an anterior pillar of the fauces may be produced by an abscess or a slough in the corresponding tonsil. In one case that has recently come under my notice the perforations were unusually large, and the tonsils were reduced to mere stumps, from which grew right across the base of the tongue a broad and elevated ridge of tonsillar tissue (compensatory hypertrophy). In this case the information was volunteered of a severe "phlegmonous tonsillitis" (*sic*) during an attack of scarlet fever.

Since my attention has been drawn to the subject I have in all cases obtained a history of scarlet fever or recurrent attacks of quinsy. Hence I look upon these perforations as caused by suppurative or phlegmonous mischief in the tonsils; and considering the circumstances under which they are generally met with, the lesion is most probably a sign of antecedent scarlet fever.

Finsbury-pavement, E.C.

### CHRONIC ECZEMA TREATED WITH OLEUM DEELINÆ.

BY THOMAS F. RAVEN, L.R.C.P.

WILLIAM B— at the age of three began to suffer from eczema; it originated, without doubt, from injudicious feeding. The face was first affected, and subsequently the whole surface of the body. At different times the limbs, back, face, and neck would be most severely attacked. The disease proved intractable for a number of years, during which time he was twice in hospital, under the care of one of the most eminent dermatologists, and although much good was gained at the time, the improvement was not maintained for more than a few weeks.

In February of this year I commenced the use of oleum deelinæ. It was first applied to the left forearm, and in forty-eight hours the result was so good that I had it painted over the whole affected surface—nearly half of the body—night and morning. In six weeks the disease was practically cured, after thirteen years' duration, and although the patient has some occasional reminders of the old enemy, and the skin is still harsh and thickened, yet he is now, after eight months, capable of doing a fair share of daily work as an artisan, while his general health, which had considerably suffered, is proportionately improved.

Broadstairs.

TYNEMOUTH INFIRMARY.—The fourteenth annual meeting of the Victoria Jubilee Infirmary was held on Monday at the Town Hall, North Shields. Mr. R. S. Donkin, M.P., occupied the chair. The annual report, which was very satisfactory, stated that the income for the past year, was £516 5s. 11d., being £126 8s. 1d. in excess of the previous year, and the largest on record. During the year 50 cases had been admitted to the infirmary, and there were 32 out-patients—total, 82; and about 600 sick requisites were gratuitously lent out. The financial statement showed a balance in hand of £524 1s. 4d.