

eration in the energy with which so many practitioners use the galvano-cautery. The mucous membrane is easily destroyed, and while the formation of scar tissue may give a sense of immediate relief, the after results may be worse than the original disease. Careful general treatment, hygienic, dietetic and climatic, with possibly a visit to a suitable spot will generally secure very satisfactory results.

Purulent Discharge from the Nose; Clinical Significance and Differential Diagnosis—GEORGE E. SHAMBAUGH, Chicago—*Med. Standard*, September, 1898.

In a discussion of the subject the author arrives at the following conclusions:

1. Purulent discharge from the nose is a common symptom of intranasal disease.
2. Its presence may be detected by the patient, but often he complains only of the secondary symptoms produced by the pus.
3. Older writers described all these cases as "purulent rhinitis," etc., and never suspected what we now know to be true, that in the majority of cases the pus has its origin in one of the accessory cavities of the nose.
4. Pus in the nose may come from (*a*) disease in the nose itself (*b*), suppuration in the accessory sinuses (*c*), or suppuration in post-nasal space.
5. The diseases in the nose are (*a*) purulent rhinitis, found in children, in acute infectious fever, in acute rhinitis and gonorrhœal infection (*b*), ulceration, either traumatic as the erosion in the anterior nares, the idiopathic perforation, ulceration due to action of chemical agents, foreign bodies, larvæ of insects and perichondritis; or tubercular or syphilitic.
6. The accessory sinuses of the nose form two groups: the first group, including the maxillary and frontal sinuses and the anterior ethmoid cells, opens into the middle meatus of the nose. The second group, including the sphenoid and posterior ethmoid cells, opens into the olfactory space between the middle turbinated bone and the septum.
7. A differential diagnosis of diseases of these cavities is one of the most difficult problems in rhinology. It requires a knowledge of the whole field of the technic of intranasal examination and a thorough knowledge of the complicated anatomy of the nose and its accessory sinuses.

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