

snare and biting forceps. The ethmoidal and sphenoidal sinuses were found soft and filled with necrotic material, and were curetted. The frontal sinus on the left side was opened externally and found filled with sanguineous fluid under pressure. The lining of the sinus was simply necrosed granulations. This material was thoroughly removed and the opening of the infundibulum was enlarged to ensure drainage. The septum of frontal sinuses was now removed, and a similar though not so severe condition was found on right side and the same procedure adopted as on the left side. The septum in this instance was of unusual thickness. The sinus was drained through nose with iodoform gauze and external wound closed.

The immediate results of the operation were gratifying for twelve hours: the temperature remaining from two to three degrees lower, pulse better quality, less pain, and patient not only recognised but conversed with relatives and attendants. After this she gradually became comatose and died thirty hours after the operation.

The autopsy was conducted by Dr. S. B. Marks, whose report is as follows:

"Skull cap easily removed, but at top along the superior longitudinal sinus for one or two inches on either side the dura was thickened, dark, and very adherent to the bone, the brain tissue being herniated in small spots where tearing took place in separation. The dura was coherent in longitudinal fissure. No pressure within the dura, which was otherwise normal save for discoloration and slight thickening at cribriform plate, the bone here being necrotic and soft as paper, being the probable point of infection. At the base of brain considerable purulent exudate, which glued the mid-brain and the temporo-sphenoidal lobes to the frontal, this exudate also extending into posterior fossa covering inferior surfaces of cerebellum and medulla. The dura exposed during mastoid operation was found normal. The contained fluid within dura was in excess of normal amount and of a dark, bloody colour. The fourth ventricle and the lateral ventricles contained no fluid."

In both cases the acute exacerbation was due to the influenza bacillus. In Case 2 Stucky did not operate at once because he believed chronic basilar meningitis existed, and that an operation in the beginning of this acute exacerbation upon a chronic condition, especially when due to the influenza bacillus, would have done no good. *Dan McKenzie.*

REVIEWS.

Lectures on Hysteria and Allied Vaso-motor Conditions. By THOMAS DIXON SAVILL, M.D. London: H. J. Glaisher, 55-57, Wigmore Street, W. New York: Wm. Wood & Co. 1909.

The subject of hysteria cannot be without interest and importance even to the most exclusive of specialists. We constantly see cases in which hysteria, or at least an hysterical element, intrudes or is suspected, and any work which tends to clear our views in regard to this factor is of the highest value to us. Dr. Savill's work on the subject deserves, therefore, careful perusal and study, more especially as it contains the confirmation of the opinions which, as he tells us, he has expressed and taught for twenty years. The relative frequency of the various symptoms is arrived at by the analysis of his own statistics and of those of Briquet. He places the vaso-motor mechanism in the fore-front in the pathology,

but he frankly admits the importance of the psychic influences on which other authors have laid more particular stress. The diagnosis of hysteria being made we must admit having had frequent disappointments in regard to the effects of treatment, and Dr. Savill shows what a wide view must be taken of each case, and how varied the treatment has to be. The instances he brings forward show in a very striking way what diverse means have to be employed in different cases if success is to be attained. The lecture form here adopted leads to a certain amount of repetition, but it allows of the author enlarging almost *ad libitum* on various details in a way that is scarcely possible in a stereotyped systematic treatise, but which is of the utmost value to the practitioner. The work is very gracefully dedicated to Dr. Harry Campbell, and is brought out in very attractive style by Mr. Henry Glaisher. D. G.

How to Cut the Drug Bill. By A. HERBERT HART, M.D. London: Bale, Sons & Danielsson, Ltd., 1909.

Those who have gone through the tedious but instructive experience of dispensing their own medicines at their own expense will remember the tendency to steady increase in the amount of the drug-bill in response to the endeavour to diminish labour without sacrificing efficiency. Dr. Herbert Hart's little work shows how with thought and calculation this may be effected with increased economy, and those who still "keep the key in their own hands" by supplying their patients with medicines instead of prescriptions will find it a valuable guide and helper. Probably very few of our readers are in this position, but many have a share and voice in the management of hospitals or dispensaries where the cost of drugs is a perennial source of inquiry on the part of the house and finance committee. To them we can most strongly recommend the careful consideration of this most practical little work. D. G.

Pye's Surgical Handicraft: A Manual of Surgical Manipulations, Minor Surgery, and other Matters connected with the Work of House-Surgeons and Surgical Dressers. Fifth Edition, revised and largely re-written, by W. H. CLAYTON-GREENE, B.A., M.B., B.C., F.R.C.S., with 343 illustrations and plates newly drawn for this edition. Bristol: John Wright & Sons, Ltd. London: Simpkin, Marshall, Hamilton, Kent & Co., Ltd., 1909.

The late Mr. Walter Pye was one of the most popular figures in the surgical world of London up to the time of his lamented death and the period of bodily enfeeblement which preceded it, and the repeated appearance of successive editions of his work has been a reminder to his friends of his genial personality. He always wrote as the friend of the student, and his book has consequently always enjoyed a popularity of its own. The present edition has been reverentially reproduced and expanded by Mr. Clayton-Greene, who has spared no pains in bringing it up to date. The sections in which we are most interested have been entrusted to Mr. Carson, who in the space allotted him has given a very useful though condensed account of diseases of the throat, nose, and ear, and he has made such good use of this space that one could only wish a great deal more had been placed at his disposal. His contribution is marked by great surgical common-sense, and will be found very useful to the practitioner. It is illustrated by some excellent plates; the drawings illustrating intubation and direct laryngoscopy are particularly good. D. G.