engaged within the orifice. Several times before inserting it I applied cocaine solution on a pledget of cotton to the vicinity of the opening. Latterly I did not find it necessary to do so, as the operation could be performed without producing pain.

Case 4. June, 1895. Miss R. B----, aged twenty-five years ; bookkeeper; applied for treatment. For several years she had been troubled with severe nasal discharge from the left nostril. On examination the indications were very similar to the others in regard to the condition of the middle turbinated and the presence of pus; there was likewise slight umbra. Some time after reducing the turbinated enlargement I commenced washing the antrum through the ostium semi-lunaries, as in case No. 3, with solution of resorcin. This was continued daily until August 10th, but although the discharge diminished, it did not cease, and I decided to open the antrum-this time through the alveolus - the chief object being to promote autoirrigation. A dentist removed the first molar, and after applying a 15 per cent. solution of cocaine within the alveolus, I opened the way into the antrum with a burr-drill. This, as in the other cases operated on, caused only slight pain. I made the opening pretty large, and after washing out the pus lightly curetted the inner surface of the antrum. I did not insert a tube, but directed the patient to wear a pledget of cotton in the cavity while partaking of food to prevent its entrance into the antrum. This she soon discontinued, believing it to be unnecessary. She, however, washed out the cavity regularly twice a day with a solution of boracic acid. For several weeks the opening easily admitted the point of the syringe; then on contracting a little, it was under cocaine painlessly enlarged again. During the three months in which irrigation was required this had to be repeated twice only. Latterly, as the pus diminished in quantity the washings became less frequent. During the early part of November the discharge entirely ceased, and before the end of the month the alveolar opening was allowed to close. Since then there has been no discharge whatever of pus from the nares.

In closing the history of these cases in private practice, it may be noted that three out of the four, or 75 per cent., were cured, with a fair prospect of a good result in the remaining case; and also the unusual fact that they were all cases of left antral disease.

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