

she was attending had mucous patches of vulva, anus and also the mouth. The writer maintains that not infrequently innocent people have similarly contracted the disease.

On the Function of the False Cords in Phonation.

Donogany (*Monatschrift für Ohrenheilkunde*, January, 1900). Out of one thousand patients, only one hundred and fifty could hold the constrictors of the pharynx still enough to permit of examination. During normal phonation the false cords moved in 62 per cent. of the cases examined. The movement consisted of an approximation of the cords, which was greatest in the higher tones. At the moment of phonation they became rounder, thicker and firmer, the approximation being closest in the middle, where a little swelling forms. Sometimes the anterior ends approach most closely, leaving a triangular interval behind. On two occasions the false cords receded from each other during the production of high notes. The movements are most marked when short notes are sounded in rapid succession. The movement begins at the moment when the glottis is closed, and lasts till it is opened again, and is independent of the height of the note. The false cords may touch only at one point, or, when assuming the functions of the true cords, along the whole length, producing a rough, unmodulated voice.

Repeated Intubation for Persistent Laryngeal Stenosis.

Joseph A. Kenefick (*Laryngoscope*, February 19th). This was a report of the case of a colored child, aged two and a half years, intubated for laryngeal diphtheria six months previously. It had been found that on removing the tube at any time dyspnea would return. The consequence was that during six months the child had been intubated forty times, and still retained the power of articulation when the tube was out.

Two Hundred Consecutive Cases of Diphtheria Treated with Anti-Diphtheritic Serum.

A. J. Tonkin (*Lancet*, October, 1899). This is a study of a series of interesting tables showing the mortality, according to situation of membrane, age, sex, and day of illness when antitoxin was administered; also, tables showing amount of albumen, frequency of mortality after tracheotomy, etc. As the result of these investigations, he looks upon the following conclusions from the use of antitoxin as being established: 1. The general mortality rate is reduced when treated during the first three days to 3 per cent.; in all other cases to 12 per cent. 2. Laryngeal cases treated early are markedly affected for the better, the death rate being considerably reduced. 3. Tracheo-