

renals, but was controlled by packing. On removing the packing, I noticed, with a probe, a large mass lying loose in the floor of the inferior meatus. This bluish, pulpy mass I picked out with forceps and retained. Behind this and on the floor of the nose I saw another mass, reddish violet in color, with irregular surface, bleeding easily to the gentlest touch of a blunt probe. The septum adjacent was noticed to be very nodular and angry, in fact, very similar to the seared surface of the turbinal after the slough comes away following the galvano cautery. These



spots bled easily; the superior and middle meatus was likewise filled with these easily-bled masses of reddish violet tinge. My desire being to catheterize the frontal sinus, I persisted in removing these masses, confining myself particularly to the superior meatus, and using a scoop entirely. I removed a very large mass of tissue, in fact, there seemed to be no end to it. I was able eventually to open the sinus, and after using a catheter was pleased to find pus coming down. I irrigated the cavity as best I could, and applied cocaine, 20 per cent, to