

right continued to discharge freely, and for four days later the patient was seized with intense pain over the right temporal region, radiating over the frontal and parietal areas. As the pain was thought to be due to an accumulation of retained pus, a radical mastoid operation was performed, and though the dura mater, and lateral sinus were exposed, nothing was found to explain the condition. The intolerable temporal pain continued unabated, and there also developed lachrymation of the right eye, and redness of the conjunctiva, due to a marked dilatation of the vessels, and not an inflammation. Seven days after the radical mastoid operation, there suddenly occurred complete paralysis of the external rectus muscle of the right eye. All the other muscles of the eye and its appendages were absolutely normal.

It was only after a month and a half that the pain and paralysis had completely passed away, when the patient was restored to perfect health. The writer cites this case as an example of "Gradenigo's Syndrome," because it presented the symptom-complex of:—

1. An acute otitis media with involvement of the mastoid;
2. Intense pain in the temporo-parietal region on the same side as the otitis;
3. Paralysis of external rectus muscle of the eye of the same side.

In the absence of fever, slowing of the pulse, and, in fact, any sign of cerebral trouble, meningitis, or other inter-cranial complications could not be considered as ætiological factors.

Professor Hédou claims that the phenomenon is due to a neuritis of the fifth and sixth nerves, brought about, according to Gradenigo, by an osteitis of the apex of the petrous portion of the temporal bone and a surrounding localized pachymeningitis, which compresses and sets up an inflammation of the nerves at a point where, after piercing the dura mater, they lie quite isolated immediately behind, and to the outer side of the posterior clinoid process.

The conclusion drawn from the study of fifty-seven similar cases of "Gradenigo's Syndrome," is that in paralysis of the external rectus muscle of the eye occurring as a complication of acute otitis media spontaneous recovery is the rule, and consequently no special treatment is required.

FERNAND PEREZ, M.D. "The Bacteriology, Ætiology and Prophylaxis of Ozaena of Atrophic Rhinitis." *Annales des Maladies de l'Oreille et du Larynx, du Nez et du Pharynx*, May, 1908.

In an original article on "The Bacteriology, Ætiology and Prophylaxis of Ozaena of Atrophic Rhinitis," Dr. Fernand Perez, of Buenos-