

spots of hemorrhage was noticed on the palatine arch, the mucous membrane inside mouth and lips, the gums being boggy and bleeding. Later ecchymosis appeared on abdomen, and gradually patient died; due to loss of blood from every mucous membrane.

From close investigation the professor concluded that the case quoted was *lymphadenitis tonsillaire leucémique*, owing to entire absence of splenic tumor, and absence of pain in bones.

Murray (Scranton) says lactic acid forming germs are the most destructive organisms found in the mouth. He sums up by stating that :

- 1 The teeth should receive attention from infancy ;
2. The mouth is often primary source of throat trouble ;
3. Bad taste in mouth suggests infection of tonsils or oropharynx ;
4. Diseased tonsils act as germ incubators, and should be removed.

Snow, of Syracuse, in an article read before the American Medical Association, spoke of the systemic factors which obtain in catarrhal conditions, and placed much stress upon sluggish skin reaction, as a cause why a good result would not follow the best nasal surgery and the most careful after-treatment. He advises cold baths and friction as the best means of producing prompt skin reaction. In patients of low vitality, some slight exercise or brisk rubbing may precede. A torpid liver or lack of exercise with attending digestive disorders may also create or make obstinate an inflammation in the Eustachian tubes, effectually blocking anything like a regular course of vapours to the middle ear. Even gastric, uterine or renal troubles have their bad influence on the 'hickness' of the membranes and many other constitutional diseases which require attention beyond what the specialist is expected or justified in giving. In other words, catarrhal deafness is often