

# LARYNGOLOGY AND RHINOLOGY.

IN CHARGE OF J. PRICE-BROWN.

## Fibrinous Rhinitis.

Gerber (*Monat. f. Ohrenheilkunde*, July, 1898). In seven of the cases examined virulent diphtheria bacilli were found. In other cases, the number not being given, streptococci, staphylococci, diplococci, etc., were found without the Klebs-Löffler bacillus. Gerber considers that the clinical pictures may be identical while the diseases are different. Of the two, true diphtheria is the more severe affection, and, he says, may undoubtedly be present without membrane. Non-diphtheritic fibrinous rhinitis usually affects children. It runs a favorable course of two or three weeks, rarely affecting other mucous membranes. Gerber considers the difference between this and true diphtheria to be one of degree only, dependent upon the vulnerability of the mucous membrane.

## Tubular Epithelioma of the Nose.

Bronner (*Jour. of Laryn., Rhin. and Otol.*, March, 1899) showed a microscopic specimen of tubular epithelioma of the nose. The growth which was the size of a large pea had been removed from the nasal mucous membrane above the front end of the lower turbinated. The operation was performed ten years ago when the man from whom it was taken was forty-seven years old. There was a history of partial nasal obstruction and frequent hemorrhage from the nostril. The growth was removed by scissors, after which the bone was burnt with the galvano-cautery. There has been no recurrence. The Clinical Research Association reported it as a case of malignant growth of epithelial type, which might be classed as a tubular epithelioma. At the periphery beneath the mucous membrane, tubules with a definite lumen could be seen.

## Two Naso-Pharyngeal Polypi of Enormous Size.

Weil (*Weiner med. Woch.*, January, 1899) reports one case. It was attached all along the posterior edge of the vomer. Two hemispherical processes filled the naso-pharynx and caused complete nasal obstruction. One large branch of the polypus filled the right nasal cavity as far as the anterior naris, while a pear-shaped portion, whose lower extremity could only be seen by strongly depressing the tongue, covered the whole post-pharyngeal wall. Weil removed it through the post-pharynx in one piece. Its weight was 45 grammes.

Max Thorne (*Laryngoscope*, April, 1899) reports the other case, which was even larger. Hearing was much diminished,