

chapter five we have the "revelations of the laryngoscope," we have also chapters on "auto-laryngoscopy;" aids to the laryngoscope; topical medication of the larynx through the laryngoscope; galvanism applied to the larynx; operation on the larynx; useful hints and general remarks on the laryngoscope, &c. There is also a chapter on rhinoscopy, its history, application, &c., together with a short statement of a few cases which have come under the observation of the author. The work is illustrated throughout, and here will be found representations of instruments which the author recommends, and which he is in the habit of using in suitable cases. This little work is eminently practical in its bearing, and all who desire to follow this department of the healing art should become familiar with its teaching.

PERISCOPIC DEPARTMENT.

Surgery.

IDIOPATHIC GLOSSITIS.

Proceedings of Surgical Society of Ireland, February 15.

MR. CROLY stated—At the meeting of the Surgical Society held on the 18th of January, I had the honour of reading a communication on acute glossitis, illustrated by seven cases, which occurred in my own practice. By a curious coincidence, I have had (since bringing the subject under the Society's notice) another case of idiopathic inflammation of the tongue under my care in the City of Dublin Hospital. The patient was seen by most of my colleagues, and also by several medical friends. I shall, as briefly as possible, detail the history of the case, which was one of unusual severity:

About eight o'clock on the night on the 23rd January, I received a letter from Mr. David Hadden (one of the resident pupils in the hospital), requesting me to visit, as quickly as possible, a girl just admitted, who was suffering from urgent dyspnoea and symptoms of glossitis.

On arriving at the hospital I found a girl sitting up in bed, suffering from alarming dyspnoea. Her tongue filled the entire cavity of her mouth, and its convexity almost touched the palate. Saliva poured copiously from her mouth; her head was thrown back; her countenance was anxious, and she breathed entirely through the nostrils; pulse 120 in the minute. She could not speak. I ascertained, on examination, that the region of the tonsils of each side was free from swelling, and