

3. Is it in the passage of the liquid into the oesophagus from the pharynx?

4. Is it in the oesophagus itself?

Having answered these you may proceed to the following?

1. Is the cause an obstruction of the fauces, pharynx or oesophagus?

2. Is it an intrinsic nervo-muscular disorder of one or more parts?

3. Is it a thickening or ulceration of the velum, pharynx, or epiglottis?

4. Is there ulceration or new formation (tubercular) near or in the interarytenoid folds?

5. Is there an extraneous cause such as (1) aneurysm, (2) mediastinal tumor, (3) enlarged bronchial glands, (4) carcinoma in the walls of the oesophagus, (5) goitre or other thyroid tumor?

J. C. CONNELL.

A CASE OF FAVUS.

LAST August I was consulted by Mrs. C., a German Jewess, regarding a rash that was developing on the scalp, face and arm of her three months' old infant. She had first noticed the rash about a week before, and as it did not yield to home remedies, but rather seemed to flourish in spite of these, she became alarmed at the condition and sought medical advice. On examination I found two well defined areas of disease on the scalp, another on the face, below the right eye, and another on the extensor surface of the right elbow. The largest patch was as large as a twenty-five cent piece, and each patch contained a number of small bright yellow discs, pitted in the centre and ranging in size from a pin head to a split pea. Through the centre of each disc on the hairy parts a hair protruded, and this was very easily withdrawn. When the discs were scraped away a mouse-like odor was distinctly perceptible. I diagnosed the case as favus, and my diagnosis was later confirmed by Dr. W. T. Connell, who found the *achorion schaeonleinii* present in