

eye suddenly appeared wide open. On careful examination it was found that there was little or no real protrusion of the globe beyond what was produced by the downward pressure of a displaced eyelid. An operation on the lid relieved the symptom which he did not regard as belonging to Graves' disease, and he thought that probably a similar operation would give relief in Mr. Semon's case. Dr. Semon in reply thought that coincidence was rendered extremely improbable by the fact that at least five cases were on record in which exophthalmos had been associated with affection of the nose. In these cases the symptoms had developed shortly after a nasal operation and always on the same side as the latter.

*The Relation of Exophthalmic Goitre to Tabes Dorsalis.*—Barić reports\* the history of a patient who presented many symptoms—on the one part those of tabes, lightning pains, Romberg's sign, absent patellar reflex, plantar anæsthesia, inco-ordination of movement, vertigo, gastric crises; on the other, the signs of Graves' disease, exophthalmos, tachycardia, hypertrophy of the heart, enlargement of the thyroid gland. He concludes that these concurrent phenomena are the expression of a pathological complexus with its seat in the bulbo-protuberantial centre. He admits that goitre may be a symptom not of the actual condition of tabes but of its early stages, that it is of the nature of a simple congestive hyperemia which is likely to be improved by a course of ergot with faradization.

Seven cases, all in females are reported by Löffroy.† All had tachycardia, six had ocular protrusion, two had thyroid tumor. He is not in accord with the views of Barić but believes that one may see in the same patient the two diseases side by side, but he recognizes the fact that ataxia may give rise to tachycardia and possibly to a slight degree of protrusion of the eye.

*The Pathology of Exophthalmic Goitre.*—Observation has taught us that in all probability the pathological changes are to be found in the nervous system, and for many years it was supposed that the cervical sympathetic was the seat of the disease, but experience showed that this view was not based on fact. The sympathetic was often found diseased when there

\* Soc. méd des hop., 14th décembre, 1888.

† Revue des Science Medicales, 15th April, 1889.