

the absence of any heightened intra-buccal pressure, the tube, if closed, will protect itself. Young children, however, cannot be got to understand the process as a rule; they struggle and gasp, and whenever the act of swallowing is induced, the Eustachian tube opens. At such a moment there is, of course, danger that the solution may carry infection into the tube. Nevertheless, wherever there is a good chance of the proper behaviour being learned by the child it ought to be carried out. The form of medication used matters scarcely at all, for the water and its mechanical effect is the principal thing. In view of the amount of mucous often present, salt solution is useful.

Of the subsequent results as to the hearing of these 57 cases I know nothing.

Our routine in the wards is to examine the ears very frequently by means of the speculum; it is surprising how often the eye of one who is not a specialist fails to receive warning of an impending perforation. The onset of otitis may be very variable; the danger exists from the outset.

The time at which the otitis began in 67 of these cases is to hand; 24 times it was in the first week, twenty times in the second, and from the third to the seventh week, the figures were 6, 7, 4, 3 and 2 respectively; one case occurred on the 100th day. Of the 24 cases in the first week, they are very evenly divided among the seven days; 3 cases seemed to happen with the very onset of the disease, and are counted as on the first day. These figures give a greater liability in the first week of the disease than any of the series I have seen published.

Of the 83 cases, both ears were affected in 25, the right alone in 30, the left alone in 28.

*Adenitis*.—Adenitis, as a complication, refers to those inflammations of the cervical and submaxillary glands which occur either after the acute throat symptoms have subsided, or which persist after the time that the angina might reasonably be expected to subside. As would be expected, the appearance of a swollen node is not necessarily attended with an exacerbation of the inflammation in the throat; the glands become large, generally firm, smooth, and tender. Those at the angle of the jaw are the most often affected.

Our series shows 69 cases (21 per cent.), of which I can find but three which required incision and drainage. My memory would have inclined me to say more than three, but such at least is the statement of the figures; the glandular inflammation is practically always accompanied by fever.

*Rhinitis*.—This is a very troublesome accompaniment of many cases,