

Hospital. The author believes the condition to be of rare occurrence in childhood. In the first case, aged nine months, there were vomiting, clay-colored stools, no jaundice and no colic. After death, which occurred from other causes, there were found eleven small black, friable calculi of pigment, three of which were impacted in the common bile-duct. The second case was that of a girl, aged eight months, who died with tuberculous meningitis. There was no jaundice or abdominal pain. There were three minute calculi of pigment in the gall-bladder. In the third case, a boy, there were abdominal pain and vomiting, but no jaundice; the calculi were of the same kind. The author had seen what he considered a fourth case during life, where there were recurrences of vomiting, abdominal pain, and jaundice. Altogether he had been able to collect twenty published cases, of which ten were in infants. In some, calculi had been found in the feces, in others at the necropsy. In many, colic and jaundice had been observed during life; the usual cause of infantile colic, nevertheless, was renal. The biliary calculi might be formed during intrauterine life, and the speaker thought that the viscosity of the bile in infancy, which led to a secondary stagnation, was probably connected with the formation of such concretions.

Syringo-Myelia with Pharyngeal and Laryngeal Lesions.

The proceedings of the Harveian Society of London, in the *British Med. Jour.* for April 15th, contains the following report of an unusually interesting case of this remarkable affection. The case was presented by Dr. Herbert Tilley, and gave the following history: The patient was a girl of fifteen in whom there was paresis of the right half of the palate, pharynx and right vocal cord. Other points of interest were the blunting of painful impressions and complete loss of thermal impressions all over both superior extremities and certain well-defined areas of the neck and trunk, atrophy of the small muscles of the hands—the latter being in the *main en griffe* position—moderate wasting of the flexors and extensors of the wrist, and slight nystagmic jerks of both eyes. A painless but severe burn on the hand and a gruffness of the voice, with some difficulty in swallowing, first led the patient to seek advice. The pharyngeal and laryngeal conditions were much improved during the past two months, during which time the patient had been taking strychnine.

Peripheral Neuritis.

The following interesting case of peripheral neuritis is found in the report of the Harveian Society proceedings (*British Med. Jour.*, April 29th, 1899). Patient, a child of three, was first