

millimetres from the posterior border. The tumors were attached by a broad, tough pedicle, and projected into the nasopharynx. They were oval in shape, pale in color, and mammillated on the surface. Microscopically they consisted solely of lymphoid tissue, encapsuled by ciliated epithelium. There were no adenoids, but large hypertrophies of the middle and inferior turbinateds were present.

The erectile variety appeared as parallel longitudinal ridges, extending along the septum from before backwards at the level of the tubercle. They, too, are broad-based, pink in color, and sometimes lobulated. Microscopically they are composed of erectile tissue, mingled with masses of lymphoid cells.

The treatment of the lymphoid tumors was removal by cold snare and spoke shave, aided by the finger in the nasopharynx. The erectile growths were excised by means of a curved, probe-pointed tonsil knife, the snare being used to engage what had escaped abscission.

The Abuse of the Electric Cautery in the Nose.

Holbrook Curtis (*Laryngoscope*, January, 1899) sounds a judicious note of warning against the too free use of the galvano cautery in operative treatment of the nose, more particularly in the treatment of deformities of the nasal septum. The mucous membrane covering the triangular cartilage is very thin and tensely stretched, and when spurs and projectures occur, may be even more attenuated. Mal-nutrition in this area readily takes place, and when the galvano cautery is applied, the destructive change which occurs in the cartilaginous cells, is very likely to produce serious mal-nutrition. Virchow has recently shown that cartilaginous repair can only arise from proliferation of pre-existing cells. The effect of the galvano cautery is to change the nature of these cartilage cells and destroy their power of healthy proliferation. The consequence is, that clean-cut incisions, whether by saw, knife or trephine, are much more amenable to the healing process.

Curtis closes an able article, replete with just criticism, with a report of two cases of perforation of the cartilaginous septum, occurring in women, and in each instance caused by the over-officious use of the galvano cautery.

Hematoma, Abscess and Serous Cyst of the Nasal Septum.

M. G. Garel (*Arch. Internat. de Laryng., Otol., Rhinol.*, 1898) describes the three phases through which fluid collections in the septum usually pass. The origin as a rule, is traumatic, commencing as hematoma and ending in abscess. Sometimes, however, abscess is the first manifestation, following injury.