

had had quite a number of these tumors examined microscopically, and then, in spite of their benign gross appearance, sarcomatous tissue was pretty generally found in them.

*The Late Dr. E. A. McGannon.*—The following resolution was moved by Dr. J. ALEX. HUTCHISON, seconded by Dr. J. J. GARDNER:

*Resolved:*—That this Society learns with feelings of sincere sorrow of the death, at the early age of 41 years, of Dr. Edward Aaron McGannon, of Brockville, Ontario.

A member of this Society since 1889, he attended its meetings, contributing papers and entering into the discussions.

He was one of the few members residing at a distance from the city who took an active interest in its deliberations.

His genial disposition and kindly manner made him the friend of all.

## SOCIÉTÉ FRANÇAISE DE LARYNGOLOGIE, D'OTOLOGIE, ET DE RHINOLOGIE.

**PRIMARY LARYNGEAL TUBERCULOSIS ACQUIRED BY COHABITATION.**—M. CADIER, of Paris, reported several cases in which examination had demonstrated the fact that phthisis acquired by cohabitation begins oftenest in the upper portions of the larynx (the ventricular bands, the upper surface of the vocal cords, and the interarytenoid space). In the majority of cases the lesions remain for some time localized in the larynx, and may be diagnosed by an attentive laryngoscopic examination, while their progress may be arrested by topical applications and cauterization. It is indispensable, however, to begin treatment as soon as possible after the tuberculous inoculation has taken place.

**RESULTS OF CASTRATION UPON THE FEMALE VOICE.**—M. MOURE, of Bordeaux, called attention to the consequence of ablation of the testicles in man and the physiological relations existing between the genital organs and the larynx. He reported two cases of women who had submitted to ovarian castration, and who showed a marked lowering of the timbre of the voice, which at the same time became much stronger. He believed, however, that these changes were not constant, and that it was not easy to recognize them when they did occur, except in singers, and especially high sopranos. It is known that after a certain age the removal of ovaries or testicles has no effect upon the larynx.—*Semaine Médicale*, May 12, 1894.

**INTUBATION OF THE LARYNX.**—DR. BONAIN, of Brest, described the instruments invented by O'Dwyer, and insisted upon the importance of possessing these tubes, which he regarded as faultless. He had used them in 23 cases of croup, 21 following diphtheria of the pharynx, and 2 without apparent diphtheria in which the

diagnosis was confirmed by bacteriological examination of the false membrane. In one of the latter cases, a child of 11 months, recovery ensued when the tube had been in the larynx eleven days. There were 7 cases of recovery in children from 20 months to 10 years. According to M. Bonain, intubation presents the following advantages: 1. The simplicity of the operation, its rapidity, and the fact that it is readily accepted by the parents, requiring no special assistance and that it can be done in any surroundings. 2. The expulsive force of the cough, considerable when O'Dwyer's tube is used, which insures better drainage of the trachea and bronchi. 3. The rarity of pulmonary complications. 4. The bloodless character of the operation, preventing enfeeblement of the patient, especially the very young. 5. The fact that the patient can express his needs and wishes in a low voice. 6. The simplicity of the after-treatment, consisting only of alimentation and watching of the patient. 7. The rapid convalescence, without cicatrice of the neck. 8. The fact that the child is not obliged, as is sometimes the case after tracheotomy, to wear a canula for some time,—a permanent danger to the lungs.

Outside of diphtheria, intubation may generally replace tracheotomy in acute or chronic stenosis of the larynx, due to tertiary syphilis or tuberculosis, in subglottic laryngitis, and in burns and fractures of the larynx.—*Médecine Moderne*, May 5, 1894.

**TREATMENT OF EPISTAXIS.**—DR. C. MIOT, in discussing this subject, stated that positive interstitial electrolysis should be the method of choice when extensive epistaxis occurred from erectile or varicose tissue. It was also of value in the treatment of more limited hæmorrhagic areas. Electrodes of copper or silver were preferable. The intensity of the current should average from 16 to 20 milliampères, and the length of the *séance* from eight to ten minutes. Three or four applications were sufficient in exceptional cases, one or two in ordinary instances. Hæmostasis in this region is easily secured, although its vascular relations with the brain are important.—*Revue de Laryngologie*, June 1, 1894.

## AMERICAN ASSOCIATION OF GENITO-URINARY SURGEONS.

**ENLARGEMENT OF THE PROSTATE.**—DR. GEORGE CHISHORE, of San Francisco, read a paper on a "Modification of Bigelow's Operation for Stone in the Bladder, Designed to Meet Cases in which the Prostate is Enlarged." He called attention to the difference in the conditions present in the cases complicated by prostatic enlargement, to the intolerance of such patients to prolonged operative procedures and to trauma of the bladder. He advocated (1) local in preference to general anæsthesia; (2) short sittings;