

bleed, give warning of the early approach of softening due to arterio-sclerosis. Cardiac hypertrophy with aortic changes, tense radial artery, tortuous temporal arteries, are also early signs. Sclerosed blood-vessels always rupture in front of the thickened and stenosed portion of the vessel. Some part of the vessel gives way, but it is not severed, only opened on one side; consequently, the hemorrhage may be dangerous. Spontaneous nose-bleed in individuals over forty years of age, which cannot be traced to one of the ordinary causes, is always a suspicious sign of general arterio-sclerosis. If the ophthalmoscope confirms this, advanced sclerosis of the brain vessels may be suspected; and from it incipient softening of the brain.

#### **Angina and Acuter Gelenkrheumatismus.**

E. Knonenberg (*Munch. med. Woch.*, No. 27, 1899). Report of a case where angina followed operation for nasal obstruction on one side, papillomatous growths being removed from the inferior turbinated with a cold snare. The angina ran a favorable course. A month later the same procedure was carried out in the other nostril. Six days later patient had a rigor; next day knees, ankles, elbows and shoulders were swollen and painful. No sore throat, no discomfort in nose. Swelling, pain and fever disappeared under salicylate of soda. Shortly afterwards there was a relapse with heart complications. Patient died. The writer refers to lacunar tonsillitis following nasal operation, and discusses the etiology of rheumatism, and its connection with tonsillitis, and the role played by organisms.

#### **Treatment of Nasal Stenosis Due to Deflective Septa, with or without Thickening of the Deflected Side.**

Six papers read before the Section of Laryngology and Rhinology, New York Academy (*Laryngoscope*, June, 1899).

Rosworth. This author upholds the superiority of the saw operation, and among others claims the following advantages: 1. The operation can be performed at an office sitting. 2. It does not involve confinement to house or bed. 3. It practically does not interfere with the daily occupation. 4. Hemorrhages are rarely severe.

Asch. The vital point is the destruction of the resiliency of the cartilage, so that the result, without loss of tissue, would be a straightened septum. Asch's operation is done under complete anesthesia. His special scissors are introduced with the blunt blade over the line of the greatest convexity, and the sharp blade in the other nostril. The cartilage is cut through by closing the scissors. They are then again introduced, more