

oner who chose, whether he had any special knowledge of the nose and its important functions or not, provided himself with a cautery battery and considered himself amply equipped to conquer every known nasal malady. Batteries are luxuries, not necessities, and the longer one pursues his work without them the more likely and more able will he be to dispense with them entirely." The author condemns we think unnecessarily those who use solutions of cocaine in operation work in strengths of 10 or 20 per cent. Rather than employ a solution stronger than 6 or 8 per cent. he would use a general anaesthetic. Either he must use general narcosis quite frequently or his patients are particularly adept at controlling their feelings. In connection with acute rhinitis he takes the decided stand that 99 per cent. of such patients have what is called lithaemia and it is from the presence of uric acid in excess that their symptoms appear. Coryzas in those patients are therefore to be regarded as neither more or less than nasal signals of systemic poisoning. Treatment is directed to eliminate the poison and he places much more value in an hours sharp exercise than all the quinine, Dover's powder and Turkish baths that were ever prescribed.

Purulent rhinitis in children, the author says, often leads to the atrophic form of catarrh. The pathology of atrophic rhinitis is not sufficiently understood as yet to warrant such a statement. In connection with this form of rhinitis mention should be made that nasopharyngeal adenoids, foreign bodies, and even antral mischief may be the cause. The chapter on hypertrophic rhinitis is the best we think that has appeared in any of the most recent works. The intimate association of this disease with the general health is clearly shown. The connection of all vices tending to keep up the trouble and the use of various cleansing and stimulating remedies is advised before resorting to any cauterizing agent. Iodine, followed if ineffectual, by chromic acid used as a "stimulant" is given preference to the cautery. It is difficult to understand how a bead of chromic acid applied to the mucous membrane of the inferior turbinated body could be anything but a caustic yet the author uses it as a stimulant in one case and later prefers it as a cauterant to the galvano-cautery. In removing posterior turbinal hypertrophies, the author says, with a snare 20 or 30 minutes is not too long a time to allow for this purpose. Without general narcosis it will be a very well trained patient that will submit to such a long sitting. Thoroughness is the key note in the treatment of atrophic rhinitis and after reading this chapter one cannot but have a more hopeful view of this very troublesome disease. The author believes uric acid is in excess in cases of hay fever, and he begins his treatment by measures calculated to eliminate the