

The irregularities of teeth that are so common are frequently due to this trouble ; and efforts at treatment would be much more successful if the original cause was removed before attempts at regulation of the teeth. The teeth, however important, are less so than the ears, because we can put in no false ears to take the place of those destroyed by continued middle-ear disease.

Treatment, then, is imperative in a large percentage of the cases and is almost altogether surgical. The methods of surgical treatment are so well known now that a description is unnecessary. What I particularly want here is to call attention again to the importance of care in examination and to advise as to early removal of adenoids in the interest of bettering the condition of the ears of the rising generation.

I have hardly mentioned the fact that these children are not only stupid in appearance, but really are stupid, and the only salvation from partial or complete idiocy in a certain percentage of cases is early operation. The approved form of operation under a general anesthetic does not seem best in all cases. The lymphoid tissue is not very sensitive, and in my present practice I sometimes remove small amounts at a sitting for several sittings, until the vault of the pharynx is clear. This is applicable to those patients where for some reason we do not want to resort to general anesthesia.

The principal point to be noticed, then, is in all cases with above symptoms and history, and also in cases of ear disease in children, is to carefully examine the naso-pharynx and to advise early removal of all lymphoid tissue in the throat.—*Pediatrics*.