

the relief of laryngeal stenosis is a new operation. Dr. O'Dwyer began his experiments in this line in 1880, but the results were only given to the profession in a paper which appeared in the *New York Medical Journal* in August 1885. The idea, however, had occurred to others as early as the beginning of the present century. Desault catheterized the trachea in 1801, and Bouchat of Paris, in 1858, first inserted a tube into the larynx for obstruction there, and proposed intubation as a means of relief from impending death from suffocation in membranous croup and in laryngeal diphtheria as a substitute for the old classical operation of tracheotomy. His proposal was critically examined and adversely reported upon by a committee composed of his *confrères*, of whom the great Trousseau was one. Bouchat's tube was short and round. The idea seems to have dropped at that time, and nothing more was heard of it until Dr. O'Dwyer appeared as its champion a few years ago.

Before speaking of the practical application of the tubes, I wish to remind the members that although the mucous membrane of the larynx and trachea is continuous with that of the pharynx, the epithelium changes. In the pharynx, the upper half of the epiglottis, and posterior wall of larynx, as low down as the vocal cords, squamous epithelium is found, and the diphtheritic membrane is infiltrated into the mucous membrane, at least in a percentage of the cases. But in the larynx and trachea the epithelium is of the columnar variety, and the pseudo-membrane does not infiltrate it, but simply lies upon it. This fact might be of importance in discussing the vexed question of the unity or plurality of membranous croup and diphtheritic laryngitis.

In operations on the mouth and in the naso-pharyngeal space I have no experience, but Thomas Annandale of Edinburgh, in a case of operation on the thyroid body, when death was threatened by suffocation, introduced a No. 10 gum catheter and thereby saved his patient. He used the catheter because it was simpler, safer and quicker than tracheotomy, and equally efficient. Dr. Macewen first catheterized the larynx July 5th and 6th, 1878, and he reports several cases of œdema glottidis treated successfully in this way. In operations in the mouth, a catheter