

with varying intensity from June 9th to the latter part of August, 1894, when a slight hoarseness appeared, and rapidly increased until the tones were of a husky and rasping character. On examination, Mr. C.'s general condition was found to be good. The right ventricular band was thickened, and both cords were also somewhat red and thickened. The anterior two-thirds of the left ventricular band was covered with a pale, yellow nodular mass, as shown in Fig. 3. It passed upwards over the posterior surface of the epiglottis and into the left glosso-epiglottic fossa.

The margin of the neoplasm was distinct, and did not apparently infiltrate the surrounding tissues. Potassium iodide was administered in increasing doses from October 15th to the 26th until five drachms a day were taken without any apparent diminution in the size of the growth. On the 31st of October the potassium was renewed and continued until November 5th, when the dose of the salt had reached one ounce per day. The neoplasm then began to diminish in size. Complete rest was enjoined, and the large dose of potash continued with the addition of ten drops of the tincture of *nux vomica* three times a day until the 14th, when the potassium was discontinued. The last course of potash, with several applications of solid nitrate of silver and chromic acid, completed the removal of the neoplasm and has left the larynx nearly normal in appearance.

Case 4. William M., aged 69, presented himself at the hospital on the 15th day of October, 1894, complaining of hoarseness and shortness of breath, with difficult respiration and regurgitation of food. Family history negative. He had chewed tobacco for fifty-four years, but had enjoyed perfect health until eight months ago, when his throat began to feel sore, and a spasmodic cough, especially violent at night, soon followed. His physical condition was much impaired, and his loss in weight during the past three months had reached over thirty pounds. He spoke in a hoarse whisper, coughed continuously and expectorated quantities of a glairy, frothy, ill-smelling mucus.

Laryngoscopic examination showed the mucous membrane of the larynx to be very red and covered with mucus; the right cord slightly red and movable, and the left cord perfectly immovable. The left ventricular band was completely covered by a yellow, nodular-looking mass which passed upwards along the laryngeal surface of the epiglottis nearly to its tip, and then into the left glosso-epiglottic fossa. The surrounding tissues were considerably infiltrated, and the anterior cervical glands somewhat enlarged and tender.

He was admitted to the hospital and given potassium iodide until the 31st, when the daily dose had risen to five drachms without any