(BARON, *Annales de la Société médico-chirurgicale de Liège*, December, 1893.)

Phenacetin, 8 grains (0.52 gramme); *glycerin*, 3 ounces (93 grammes). Half a teaspoonful to a child 1 year old every two hours until paroxysms become fewer and less intense. (G. G. THORNTON, *Medical Brief*, February, 1894.)—*Universal Medical Journal.*

PATHOLOGICAL SOCIETY OF LONDON.

Meeting of December 19, 1893.

Dr. SOLTAU FENWICK presented a specimen of *diphtheria of the stomach* from a child of 3 years who had suffered from croup. Dyspnœa coming on, tracheotomy was performed, but death followed next day. At the post-mortem examination, primary laryngeal diphtheria was found, extending down into the finer ramifications of the bronchial tubes, the tonsils, pharynx, and œsophagus being free from the disease. The stomach was entirely lined with membrane, extending into the pylorus a distance of one-third inch. The lymphoid tissue of the mucous membrane itself was considerably increased. The interesting features of the case were the involvement of the entire surface of the stomach, the absence of membrane in the pharynx and œsophagus, the complete anorexia and vomiting, and the absence of free hydrochloric acid from the contents of the stomach. Diphtheria of the stomach is rare, and occurs almost always in connection with pharyngeal diphtheria in children. Mr. S. G. SHATTOCK had seen a similiar case, in which the œsophagus had been free.

Mr. BOWLBY showed for Mr. PAUL, of Liverpool, a *tooth-bearing dermoid of the face.* The patient, a boy of 5 years, was born with an irregular patch of skin on the left cheek, in which a tooth appeared some six months prior to observation and removal. The tumor had no connection with the bone, and no teeth were missing from the jaws. The tooth was a left upper lateral incisor, and beneath it there was a second, smaller, and corresponding to that of the permanent set.

Dr. FELIX SEMON and Mr. S. G. SHATTOCK reported the *sequel of a case of anomalous tumor of the larynx*, which they had brought to the notice of the society in May, 1891. The growth sprang from the left arytæno-epiglottidean fold, and appeared like an angioma. After removal by the galvano caustic loop it was seen to be a delicate papilloma incased in a shell of partly fresh, partly organized blood-clot. The authors had, at the time, called attention to the unusual situation of the tumor, to its structure, which was more like that of papillomata of the bladder than of the upper air-passages, and to the unique fact of spontaneous hæmorrhages occurring in connection with and the formation of a blood-shell around the papillary growth. Four months after operation there was a recurrence of the growth, and in a month and a half it was larger than it had been originally. It was again removed in the same manner, and, evidences of malignancy being present, subhyoid pharyngotomy was performed and the tumor radically removed. The patient, a man of 44 years, died four days after operation. At the post-mortem examination, œdema and intense congestion of the brain were found, but no cause for this condition could be determined. Histologically the growth was papillary, delicate and thickly incased with blood-clot, extensions of which passed between the different processes composing the tumor. The investing epithelium of the mucous membrane was quite distinct from that of the growth, consisting of stratified squamous cells, while the other was made up of cubical or cylindrical cells, not more than one layer in thickness in some places. The growth projected beyond the general surface, and infiltrated the deep parts, resembling in this a columnar-celled or duct carcinoma of the breast, with which the authors compared it, regarding it likely that the growth arose from the mucous glands. Assuming this to be the origin, in the process of growth, a portion projected from the surface, allowing of removal, while it extended deeper, infiltrating the structures below the level of the mucous membrane, and beyond the reach of operation. The hæmorrhage was explained by the delicacy and vascularity of the tumor. This is the first case described in which a primarily malignant disease of the larynx simulated in its early stages an angioma. Mr. LENNOX BROWNE, who had previously stated that this tumor might have been an instance of the transformation of benign into malignant growths by endo-laryngeal operations with the galvano-cautery, withdrew this statement after the record of the histological examination.

Dr. ROLLESTON reported *three cases of mediastinal abscess in connection with the œsophagus.* The first patient was a woman of 30 years, who suffered from sore throat, and who presented a swelling on the right side of the neck above the clavicle. There was some dysphagia, and pus mixed with blood was coughed up. Death occurred from hæmorrhage. The cause of suppuration was obscure, there being no disease of the bones. In the second case suppuration followed a stricture due to a corrosive poison, and took place around the middle of the œsophagus. The third case was in a man of 50, who, following a violent effort, was seized with pain and vomiting. Pleural effusion developed in left side, and death occurred in two days. The cause of the perforation of the œsophagus was not known, though apparently it bore some relation to the violent effort.