animal died of acute tetany, another proof of the interdependence of thyroid on parathyroid.

W. H. Brown, of Victoria, Australia, reports (ANNALS OF SURGERY, February, 1912) a successful case of autotransplantation of the thyroid in a case of tetany following thyroidectomy. This was a most severe case and was not controlled by implanting the parathyroids of animals, including monkeys, or the taking of fresh parathyroids by the mouth. He also injected parathyroid emulsion. Finally he managed to get some human parathyroids from a patient half an hour after death, and successfully transplanted them into the left rectus abdominis muscle. From that time the patient began to improve and a couple of months later had gained 15 pounds and was perfectly well. Mr. Brown had given lactate of calcium in this case without the least benefit, but when we learn the dose was only ten grains we do not wonder at his want of success.

Isaac Ott reports the temporary cure of tetany after complete parathyroidectomy by the administration of pituitary extract.

Now I have always thought there was little danger of removing all the parathyroids or injuring them in performing total thyroidectomy, for I had in quite a number of cases removed the whole thyroid and in others left only the isthmus or a part of one of the lateral lobes, and I never saw a case of tetany or cachexia strumapriva. However, last January I operated on a case in which I was forced to remove nearly all the thyroid, and this operation was followed by severe tetany. In this case no trace of any parathyroids was found in a most careful examination of the removed gland by Dr. Rhea, the pathologist to the Montreal General Hospital, so we must conclude that the parathyroids were so injured at the operation that they were rendered useless. I thought I recognized the right lower one at the time of operation and studiously avoided injuring it, but it no doubt was something else. The following is an account of the case, which is reported by my house surgeon, Dr. H. H. Hepburn: