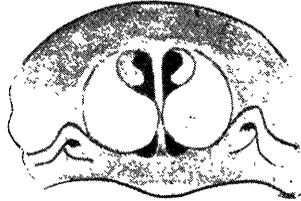


1 were "satisfactory," 3 were "fairly satisfactory," 1 "disappointing," 1 "inconclusive," 1 "failure" and 1 is described as "no test." As far as the author can ascertain, one kind of pollen is not more active in one than in another case, so that, apparently, different types of pollen need not be selected for treating different patients. *MacLeod Yearsley.*

**Sturm, F. P.—Nasal Obstruction due to Osteomata of the Posterior Nares.**  
"Brit. Med. Journ.," March 16, 1912.

Boy, aged eleven, with deafness and complete nasal obstruction. After removal of tonsils and adenoids, digital examination revealed a



dense bony enlargement of the posterior end of each inferior turbinal. Each was the size of a cherry, and so dense that neither spokeshave nor saw made any impression. *Dan McKenzie.*

## PHARYNX AND ŒSOPHAGUS.

1. **Winslow, C. E. A.—An Outbreak of Tonsillitis or Septic Sore Throat in Eastern Massachusetts and its Relation to an Infected Milk Supply.** "Boston Med. and Surg. Journ.," vol. clxv, p. 899.
2. **Darling, E. A.—Clinical Aspects of the Epidemic of Septic Sore Throat in Cambridge.** *Ibid.*, vol. clxv, p. 904.
3. **Richardson, M. W.—An Epidemic of Tonsillitis due to Infected Milk.** *Ibid.*, vol. clxv, p. 907.
4. **Goodale, J. L.—Observations on the Epidemic of Sore Throat Occurring in Boston and Vicinity during May, 1911.** *Ibid.*, vol. clxv, p. 908.

These four papers require to be taken together, as each is the complement of the others, supplying information lacking in its fellows. It appears that in May, 1911, there was a sudden increase in cases of acute tonsillitis in parts of Boston and its suburbs, the increase in the cultures examined in the health laboratories being 100 per cent. It became realised quickly that most of the families affected used a single milk supply. The dairy company called upon Winslow to make a thorough study of the situation, and the first paper deals with his work upon the records of 1400 cases. The disease differed from ordinary tonsillitis, appearances varying from diffuse redness to characteristic white patches, or even a diphtheria-like membrane formation. The most striking feature was secondary gland enlargement, sometimes with sepsis, etc.—Winslow compares it to English "septic sore throat." The local geographical distribution is discussed, with the epidemiological characters of the outbreak. The incubation period appears to be from two to three days. As very few secondary cases derived by contact occurred, it is to be concluded that the disease was almost non-contagious. It was notably concentrated in the affected households, and women were much

more attacked than men (71 per cent. to 29 per cent.). Children were comparatively free, more than half the cases being young adults from sixteen to forty-five. The severity increased with age, most of the fatal cases being in persons over fifty-five. Winslow obtained records of ninety-six fatal cases, making a mortality of 6.8 per cent. Discussing the cause, it is stated that none but milk supply appeared adequate to explain the observed phenomena. The geographical distribution coincided closely with a single milk supply, and examination of the coincidence between milk supply and disease in the individual household gives evidence of a causative relation which is "irresistible." Precautions taken at the dairy to guard against infection are described.

The second paper is based upon 555 cases. Darling points out that nearly all the cases occurred in well-to-do families living in the best residential parts and in the most favourable hygienic surroundings. The organisms found were streptococci, often with staphylococci or pneumococci. The relation of sex was, males 30 per cent., females 70 per cent.; and 314 cases were between twenty-one and sixty years of age. The period of incubation was from thirty-six to seventy-two hours. Clinical history showed sudden onset, with sore throat, painful deglutition, and moderate fever, often preceded by chills, headache, and prostration. Nausea, vomiting, foul breath and anorexia were common early symptoms, and in children gastro-intestinal symptoms were often more pronounced than the throat symptoms. Complications occurred in one quarter of all cases. They were, in order of frequency, abscess formation in or near the throat, inflammation of serous membranes (arthritis, endocarditis, peritonitis—all fatal—and pleurisy), pneumonia (eight died out of eleven), functional digestive disturbances, hæmatemesis, entero-colitis, acute endocarditis, acute nephritis, erythema, headache and delirium (one case of intense mental excitement followed by manic depression), neuritis. Twenty-seven deaths occurred, 9.4 per cent. of which were between forty-one and sixty and 31 per cent. over sixty. Darling summarises the unusual features of the epidemic as (1) its extraordinary virulence; (2) the comparative immunity of children; (3) the high mortality among the aged and infirm.

The third paper is a short one by the Secretary of the State Board of Health, and is illustrated by a chart showing the relation of the milk supply to the houses attacked. It shows that, whilst the particular dairy only supplied 13.8 per cent. of the total number of houses, 61 per cent. of the total cases occurred in houses thus supplied.

The fourth paper is based upon Goodale's own cases and points out two facts—the extreme infectiveness of the milk and the remarkable tendency of the infection to serious complications. The primary infection occurred in the lymphoid tissue of the fauces and pharynx (one case, whose tonsils had undergone complete fibrous metamorphosis, had acute inflammation of the posterior pharyngeal wall). When recovery occurred without complications, marked prostration and slow return of strength were noted.

None of the papers speak of treatment, but H. L. Chase, in the discussion which followed their reading at the Suffolk District Medical Society, stated that success had attended the use of streptococcus vaccine: Garland said that ice was very valuable and cold baths most useful in pericarditis.

*Macleod Yearsley.*