

inquiry there is no definite history of specific inoculation, but there have been opportunities for its occurrence. No tubercle bacilli or *Spirochæta pallidæ* have been found. He has again been ordered perchloride of mercury, iodide of potassium, and good feeding. On December 1 the perforation was found to have extended in depth and a large sequestrum of bone was detected and removed. Nitrate of silver was applied to the edge of the perforation. On January 2 he was admitted into the hospital on account of the occurrence of hæmorrhage from the anterior part of the ulcer on the previous day. Chloride of calcium was ordered, and the plug which had been introduced was removed without any recurrence of bleeding. Calmette's ophthalmic reaction was found negative, but Wassermann's serum test positive. He has again been ordered iodide of potassium in 10-gr. doses, and a mouth wash of acetico-tartrate of alumina. It is proposed to give him intramuscular injections of calomel. Apparently we have to deal with a specific ulceration in one who was formerly the subject of tuberculosis. Evidence has been forthcoming as to the probable inheritance of a specific dyscrasia, of which, however, the patient presents none of the usual physical signs.

**Growth in the Nasopharynx of an Elderly Female, like very pale "Adenoids," but much more Dense in Consistence, suggestive of Malignancy.**

By J. DUNDAS GRANT, M.D.

THE patient, a woman aged 63, was referred to the exhibitor on the 29th of last month on account of swelling of her right tonsil and obstruction in the nose. No air could pass through the left nostril, although the front part of it was quite free. On posterior rhinoscopy the nasopharynx was seen to be occupied by a growth which to the eye presented the appearance of adenoids, but to the touch was very much tougher, and a portion was removed for examination under the microscope with the expectation that it would present the characters of epithelioma. On a second attendance she was ordered iodide of potassium, on the presumption that the condition might be tertiary specific. She was so intolerant of examination that palpation was not then practised, but a probe passed from the anterior naris impinged upon bare or very thinly

covered bone. The disease was apparently of four months' duration. During this time her vision has been getting defective, and the left eyeball has turned inwards—paralysis of external rectus. An ophthalmological examination will be made.

Microscopical examination revealed the structure of a granuloma, and there is every probability that the case is specific and that a deep-seated sequestrum will be detected.

#### DISCUSSION.

Mr. HERBERT TILLEY asked whether Dr. Grant had examined the patient with his finger. He had had to do with a stout lady, aged 53, from whom he removed the largest adenoid he had ever seen.

Dr. SCANES SPICER said he caught sight of some thick, whitish-grey pus, very much like little masses of diphtheritic membrane. He asked whether sinuses, as foci of infection, had been definitely excluded.

Dr. GRANT, in reply, said the patient was very intolerant of examination. The tissue was denser than adenoids generally were, and he removed a small portion with StClair Thomson forceps. Dr. Wingrave reported it as lymphatic infiltration, with plasma cells, stratified epithelium and glands. There were no nests and no sign of malignancy. He would have her eye examined, and in the meantime she was having iodide of potassium. He believed the finger would come upon bare bone.

### **Microscopical Section from Fragment of an Adenoid-like Growth in the Nasopharynx of a Middle-aged Lady, probably an Early Stage of Epithelioma.**

By J. DUNDAS GRANT, M.D.

THE patient's chief complaint was of dullness of hearing in the left ear, there being great difficulty in the introduction of a Eustachian catheter. A year ago what appeared to be 'adenoids' were removed, and it was found that the nasopharyngeal space was encroached upon by a projection of the atlas. A return of the stuffiness in the nose led to a renewed examination. The adenoid growth seemed to have redeveloped, and a portion of the tissue was removed, giving relief to the breathing through the nose. There are no enlarged glands, but the