Case of a Man with a singularly Symmetrical Syphilitic Septum.

By W. STUART-LOW, F.R.C.S.

The patient, a young man, came complaining of stuffiness of the nose of three months' duration. A history of syphilis two years ago was elicited. On the nasal septum from the vestibule upwards on each side pale, papillomatous-looking growths were seen projecting into the passage and obstructing it. The septum felt very thin and unusually movable, and the upper triangular cartilages were loose and seemed to be falling inwards.

Dr. Wingrave's Report and Microscopic Specimens.—Growth from nasal septum consisted of granulomatous tissue showing a tendency to fibrosis. Lymphocytic infiltration was well marked with but slight endothelial activity. There were no "giant-cells" but considerable fibroplastic change. The surface epithelium was of the stratified squamous type, thickened and corrugated. No signs of superficial ulceration. Endothelial activity was visible in several small vessels (arteritis obliterans). No bacteria of any kind were present in the tissue. Nature of tissue: granulomatous, probably tertiary syphilis.

A Modification of the Posterior Rhinoscopic Mirror.

By Dan McKenzie, M.D.

The modification consists in the mirror having a moderately convex surface instead of the usual plane surface. The advantages of the convex over the plane mirror are as follows: The field reflected is much more extensive; thus, the archways of both posterior choanæ, the septum from its upper to its lower end, and the turbinals can all be seen in the mirror at once; so that the relationships of polypi, tumours, &c., are more rapidly and accurately defined. The image in the convex mirror, though smaller, is certainly no less clear than that in the plane mirror, if a bright illuminant be used. Finally, with the convex mirror, the examination of the posterior nares occupies much less time than with the plane mirror, a great advantage when examining nervous patients.