degeneration. Staining by Ziehl-Nielsen and Gram's methods failed to demonstrate any tubercle bacilli in the sections.

Fig. 2.—From a photograph by Dr. R. A. Fleming. About 750 diameters magnification. Part of the same section as photograph No. 1, showing giant cells.

The pharyngeal adenoids on section were found free from tubercle, and consisted simply of lymphoid tissue, covered by a layer of the columnar epithelium of the nasopharynx. Some enlarged cervical lymphatic glands were subsequently removed from the same patient, and these on section showed typical tuberculosis in various stages of advance, from simple enlargement to caseation.

This case seems to show that the tonsil is more important as a channel of tuberculous infection than has hitherto been supposed; and when we regard the frequency with which it is attacked, and attacked successfully, by pyogenic organisms, it is not to be wondered at that the tubercle bacillus sometimes enters it and flourishes in its lymphoid tissue, a tissue which is *par excellence* a seat of tuberculous deposit.

THE TRANSMISSION OF DIPHThERIA BY NON-SUFFERERS.

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THE following series of cases is of interest, as showing the possibility of the conveyance of the diphtheria poison by persons who do not themselves suffer from the disease:

HOUSE A.—Case 1.—R. H., aged 45, began to be ill on October 4th, 1894. The case was typical, and was followed by double "drop-wrist." No other person in this house suffered from sore throat.

HOUSE B.—This is half a mile distant from A. There was no communication between the houses till December 26th, when the occupier began to work for R. H. Case 2.—E. J., aged 7½ years, had a sore throat on or about January 2nd, 1895. The case was a typical one, followed by paralysis of both legs. The patient died from cardiac syncope. Case 3.—E. J., aged 4 years, began to be ill on February 6th. This was a typical case, and resulted in death from asphyxia. Case 4.—J. J., aged 12 years, had a sore throat on February 16th. The case was typical, and was followed by dimness of sight and strabismus. Bacteriological examination of cultures from the throat showed the presence of large numbers of diphtheria bacilli.

HOUSE C.—This farm house stands on a peatmoss, and is 1½ mile distant from houses A. and B. Case 5.—R. J., aged 18, brother of the last three patients, worked here from

January 15th. His mother stated that he was at home for a few minutes on the days his sisters were buried, but at no other time. He himself admitted having been home on each Sunday to change his shirt, which he did in the room occupied by the patients. He stated that he did not suffer from sore throat at any time, but bacteriological examination showed typical diphtheria bacilli in large numbers to be present in the throat. There is no history of his ever having had diphtheria. Case 6.—J. C., aged 18, began to be ill on February 26th. He worked on the same farm as the last youth, and slept with him. He went home to House D. on February 27th, being then "full of cooth," and suffering from sore throat, and unable to work. Typical diphtheria bacilli were present in great abundance on March 15th.

HOUSE D.—This is 1½ mile distance from House C., two miles from B., and 2½ miles from A. Case 7.—J. C., aged 13, slept with the last patient, his brother. He came home from chapel on March 3rd, complaining of sore throat. On March 8th he was seen for the first time by his medical attendant, and was then dying. No bacteriological examination was made. Case 8.—E. C., aged 3 years, sister of the last two patients, began to be ill on March 12th. The case was a typical one, and an abundance of typical diphtheria bacilli was found on bacteriological examination.

REMARKS.—House B. was probably infected by the father of the family, who himself did not suffer from the disease. His son, Case 5, did not suffer from the disease, though he was proved to have its germs in his throat, but he was the means by which it was carried to House C., whence it was taken to D.

AN UNUSUAL CONDITION OF THE PILLARS OF THE FAUCES, PROBABLY CONGENITAL.

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THE following case presents certain features which may be deemed sufficiently interesting to warrant publication:

The patient, a married woman, 29 years of age, consulted Dr. Monro at the Medical Dispensary of the Glasgow Royal

Infirmary in March last year, on account of a catarrh of the