

The researches of Aschenbrandt, Kayser and Bosworth have established the fact beyond dispute, that the venous sinuses of the turbinateds discharge by transudation from twelve ounces to sixteen ounces of serum per diem for the definite purpose of saturating the air in its passage downwards. The venous sinuses discharge this fluid either by the tubular mucus glands of Zuckerkandl or by the minute serous canals of Chatellier, probably by both, as many believe the two to be identical.

However that may be, the turbinateds alone possess venous sinuses and tubular canals, and consequently no other bodies can effectually perform their functions. The posterior pharynx is not supplied with this intricate apparatus for irrigation; and when nasal breathing is cut off from whatever cause, the small amount of moisture in the throat is immediately picked up by the air in breathing, leaving the mucous membrane in a parched condition and producing to some extent the soreness of which clergymen so often complain.

Let oral breathing once become established, particularly when from any cause the voice requires to be used in an unusual degree, and follicular pharyngitis is one of the most frequent results. Thick, tenacious mucus will be secreted in the throat, with the resulting screatus to clear the parts of the viscid substance.

Sometimes, too, the palatal muscles are brought into such constant action, in the effort to procure relief, that the uvula becomes elongated and thickened. From its newly acquired size, it in turn becomes a foreign body lying on the tongue and inducing efforts of unavailing deglutition.

Another effect, not by any means unfrequent, arising from this abnormal pharyngeal exposure, is catarrhal and follicular tonsillitis, with enlargement and hardening of these bodies.

Still another result of obstructed nasal respiration, particularly so with clergymen, is hyperæmia of the vocal chords, accompanied by hoarseness, soreness and catarrhal secretion.

It is quite possible that these symptoms may sometimes arise from reflex action of the sympathetic and pneumogastric nerves, caused by an abnormal condition of the stomach and other digestive organs, and in which the nasal respiration is free and unobstructed; but the fact remains, that the majority of chronic throat affections, particularly in clergymen, owe their origin to nasal obstruction of one form or another. Hence, it should be our first duty in every case to examine the nose and naso-pharynx thoroughly, before concluding that the throat disease had its origin in the pharynx *de novo*.

The writer concludes by giving the history of ten cases of throat