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PRIMARY TUBERCULOSIS OF THE LARYNX.

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(Read at the Meeting of Ontario Medical Association.)

My desire to direct your attention to the subject of tuberculosis of the larynx arises, not so much from the importance of this affection, *per se*, as from its importance as a means of leading us to an early diagnosis of pulmonary phthisis. It shall, therefore, be my object to present the subject to you as much as possible in its relation to pulmonary phthisis—from a diagnostic point of view—by pointing out first, that tuberculosis may occur primarily in the larynx (in which case it is probably always followed at no distant date by the lung affection); and secondly, that in a large percentage of cases the disease exists, and may be recognized in the larynx, when it has not advanced beyond its earliest stages in the lung. The importance of this is obvious, because it is only when we take tuberculosis in the early stages that we can hope to bring about a cure by therapeutic treatment or residence in a suitable climate. We are, perhaps, in a position to discuss the subject to better advantage to-day than we were a few years ago, because within that time the researches with the microscope, and the discovery of bacillus peculiar to tubercle, have afforded an aid to diagnosis which

enables us to recognize tuberculous disease in the larynx with certainty, at a much earlier period than we formerly could have done. It is, to a great extent, by this means also that we are, in my opinion, in a position to prove the fact that tuberculous disease may attack the larynx primarily, and before any other organ of the body has become affected. Pulmonary tuberculosis is certainly a very common cause of the laryngeal disease, and indeed, it is not too much to say that one rarely finds a normal larynx in a phthisical patient, although the changes may be so slight as not to interfere with its functions. A very few statistics will show you the frequency of laryngeal phthisis. The *post mortem* examinations of Willigk and Heinze show that about 30 per cent. of patients who died from pulmonary phthisis had also the disease in the larynx, and this proportion refers only to cases in which there was destructive disease in the larynx, and excludes, therefore, the paralysis, pareses, anæmia, etc. Mackenzie found in 100 cases of pulmonary phthisis, which he examined from the London Hospital, changes in the larynx in 71 cases, and of these 71 cases there were ulceration and infiltration in 33 cases; and Schäffer found out of 310 only eight cases where the larynx had not some form of disease. Although it is nowhere disputed that in the majority of cases the disease in the lung is prior to that in the larynx, yet I find among the authors considerable difference of opinion as to whether the disease may first of all affect the larynx. Whilst Trousseau, Rhüle, Neidert,