

LARYNGOLOGY AND RHINOLOGY IN RELATION TO GENERAL MEDICINE.

BY PERRY G. GOLDSMITH, M.D., C.M., TORONTO.

Member Laryngological and Otological Sections Royal Society of Medicine. Assistant Surgeon Ear,
Nose and Throat Department, Toronto General Hospital, Laryngologist
National Sanitorium Association.

In discussing a topic such as this, I fear I will be unable to add anything new to the sum-total of our knowledge of the subject, but my excuse for taking up your attention for a short time is that we are very prone to forget some simple physiological or etiological facts concerning our special organs. He who treats any organ as if it were a thing existing alone, and not as a part of a great and complex system, has not a sound idea of the natural history of disease. Some are prone to see nearly all the ills of their generation as arising in that locality in which they are entirely interested, while on the other hand, there are others, whose number is decreasing all the time, who fail to grasp the importance of looking to distant organs for signs and causes of some general disease. Somewhere between these two extremes will be found the successful specialist and general practitioner.

The subject may be considered in its relation to various systems of which I will first take up the Respiratory System.

Diseases of the lungs may owe their origin to direct extension of disease of the upper air-passages to the Trachea and Bronchi. The nose, which is the gateway to the lungs, is charged with the following duties in preparing the air for its entrance to the lungs:

- (1) Removal of foreign substances as much as possible.
- (2) Warming the air.
- (3) Imparting to the air the requisite degree of moisture.

(4) A subordinate function consists in protecting the organism by means of the sense of smell and nasal reflexes. Unless nasal respiration is normal we find almost invariably some disturbances in the upper respiratory tract, the most common of which are the various types of laryngo-trachitis and chronic bronchial affections. Owing to the lowered resistance of the bronchial mucous membrane, acute diseases are much more liable to occur. Furthermore, disturbances of the sensibility and of the reflex activity of the pharynx and larynx have an important bearing on the lungs and bronchi, as they facilitate the development of inhalation pneumonia.

The relationship between suppuration conditions in the nose and naso-pharynx, and acute and chronic bronchial affections has

* Read at a Clinic at the Western Hospital, Toronto.