

# CANADA MEDICAL RECORD

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## DEVIATED NASAL SEPTUM.

CLINICAL LECTURE DELIVERED AT THE WESTERN HOSPITAL  
(DEPARTMENT FOR DISEASES OF THROAT AND NOSE).

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In discussing this subject to-day, time will not allow us to deal with the etiology and pathology of the deformity. I will, therefore, briefly refer to the evils caused by it, and the best means taken for its correction, before operating on the case before us.

I would ask you first to remember that the function of the nasal mucous membrane is essentially respiratory. The turbinals secrete normally 12-16 ounces of thin watery fluid in 24 hours, to moisten the respired air and prepare it for the bronchi. If stenosis of one or both nostrils occurs, there is a constant liability to throat and bronchial disease, owing to the physiological function of the nasal passages being arrested. In fact, there is a certainty of throat disease ensuing in some form. Instances have been noted where this function, on being restored, has caused the previous existing throat trouble to spontaneously disappear without other treatment being resorted to.

The treatment of nasal stenosis due to deflected septum consists in straightening the deformity. In some cases where the septum is but slightly deflected from the median line, the main obstruction to the naris on the convex side may be due to hypertrophied turbinals, and not to the slight deflection, in which case the septum should be left untouched. All