

## A BRIEF CONSIDERATION OF EMPYEMA OF THE ACCESSORY CAVITIES OF THE NOSE.

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The subject of diseases of the accessory cavities of the nose has been considered in medical literature for over two hundred years, but it is only within this last decade that the pathological anatomy has been thoroughly worked out by Zuckerkandl, Grünwald, Hajek, and other continental teachers, who have thus established a firm foundation and enabled the surgeon to form an accurate diagnosis in such cases.

I do not propose to go deeply into the subject this evening but simply to refer to some of the more important features. When pus is found in but one side of the nose, and after excluding syphilis, tubercular ulceration of the nasal mucosa, and the presence of foreign bodies, the probability is that one or more of the accessory cavities is diseased. Parosmia is a very frequent subjective symptom, the objectionable odour so frequently complained of by such individuals may only be subjective or it may cause offence to others this being dependent upon the amount of destruction present. On examination of the nose, if the antrum of Highmore, the frontal cavity, or anterior ethmoidal cells are affected, pus is usually found in the anterior third of the middle meatus in the region of the hiatus semilunaris and if an accessory opening exists in the inferior meatus, pus will be found in this situation. It will be readily understood if one will only bear in mind the normal openings of these three cavities why pus should appear in this situation, for the aperture of the maxillary antrum is situated in the posterior part of the hiatus semilunaris under the anterior end of the middle turbinal. The most constant opening of the anterior ethmoidal cells is situated between the ethmoidal bulla and the anterior insertion of the middle turbinal, that of the frontal cavity in its most dependent part, and leads into the nasofrontal duct which opens into the uppermost part of the hiatus semilunaris. The diagram below shows clearly the respective openings of the frontal, anterior ethmoidal, and the antrum of Highmore.

The opening of the posterior ethmoidal cells is in the sphenoid-ethmoidal recess and that of the sphenoidal cavity in its anterior wall. The size of the latter opening varies but is always situated in the anterior wall, the distance of the aperture from the anterior nasal spine being

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