

(6) Frequent attacks of rhinitis, with almost nothing to be seen in the nose other than the evidence of inflamed membrane, are very often due to a quiescent sinusitis which undergoes attacks of acute infection.

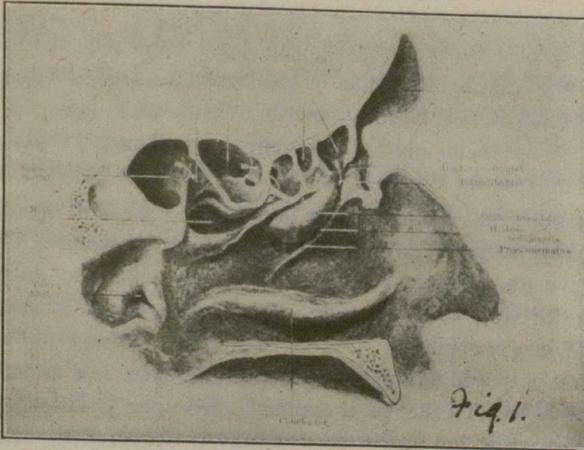


FIG. 1.—Outer wall of the left nasal chamber after the removal of the superior and middle turbinals, exposing the anterior and posterior ethmoidal cells. The bulla is very large and as a result narrows the hiatus, and shows the ease by which pus, especially when the anterior lip of the hiatus is hypertrophied, may be directed into the antrum. (Logan Turner.)

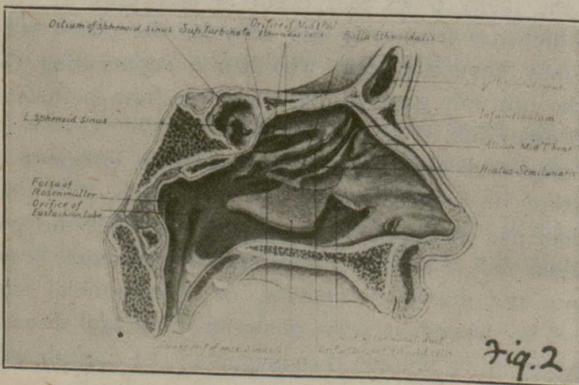


FIG. 2.—Lateral wall of the left nasal cavity, showing portion of the inferior turbinate removed to expose lacrimo-nasal duct, behind which the operation on the wall should take place. The middle turbinate has been removed to show the orifices of the sphenoidal and frontal sinuses. (Onidi.)

(7) The patient's desires, as far as is possible in conforming to good surgery, should guide one somewhat in his line of treatment. The age and general constitution also play a part. If, in a patient complaining of some nasal discharge, which is not of very great inconvenience, one