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RUBBER SPLINTS IN THE TREATMENT OF SEPTAL CURVATURE.*

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Three years ago I had the honor of reading a paper before another American Society on the use of rubber splints in the treatment following intra-nasal operations. Since that time I have had occasion to use them in many instances in which operative treatment was required; and now desire to lay before the Fellows of this Association, in a brief paper, the result of that experience; confining my remarks, however, to their use in cases in which septal curvature was the principal evil to be dealt with.

While vomeric ridges and exostoses may extend all the way back to the posterior nares, curvatures are usually confined to the anterior two thirds of the septum; and a majority of these principally to the triangular cartilage. It is in the treatment of the latter class of cases that the rubber splint is particularly suitable.

In the formation of septal curvature there are several points which are of great practical interest. In a large majority of instances, particularly when occurring in adult life, the curvature of the cartilage is accompanied by thickening, which develops chiefly on the convex side and in the neighborhood of the so-called septal tubercle. While this thickening is simply physiological on the straight septum, it becomes pathological on the curved septum, owing to the hypertrophic enlargement of the glandular tissue, occasioned by the rounding or stretching which the curvature gives to the mucus membrane. In

* Read at the annual meeting of the American Laryngological Association in Boston, May, 1902.