

NOSE AND THROAT

IN CHARGE OF

J. MURRAY McFARLANE, M. D.,

Laryngologist to St. Michael's Hospital. 32 Carlton St.

MODERN METHODS OF TREATING
DISEASES OF THE NOSE AND
THROAT.

BY O. B. DOUGLAS, M.D., NEW YORK.

Our interest in diseases of the nose and throat seems to centre upon treatment—that which cures. But first, we must have a knowledge of the diseases, and it may be well to know how we get them—the ætiology—and to consider their symptoms, complications, and effects.

Diseases of the nose and throat are more numerous—of more frequent occurrence—than at first thought we might suppose; there is a longer list of them, and a larger train of evil effects, than is likely to be recognized by one who has not carefully considered this matter. In the twenty minutes devoted to this subject I can hardly do more than mention a few of the commoner diseases, such as are of most frequent occurrence, and cause, in the aggregate, the most suffering.

Things we see oftenest impress us the least. We give more attention to the infrequent diseases than to those we are called oftener to treat. Common, every day conditions, lose their terror, however bad they may have seemed or really were. This law (of callousness) explains our indifference to a common cold, which often is but the initiatory stage of grave and fatal maladies.

President Lincoln is said to have observed that "the Almighty must consider common things important, for He made so many of them." These diseases are important because they are so numerous and so far-reaching in their effects. The opprobrium of our profession is not in curing common ailments, those little ills which, in the aggregate, cause greatest distress, not the rare, infrequent, obscure conditions.

Diseases of the nose and throat may be acute or chronic, simple or complicated, local or general, organic or traumatic, acquired or congenital, benign or malignant. An entire catalogue comprising the acute, subacute, and chronic stages would be long and tedious and not to our purpose. But we should be able to distinguish syphilitic, tuberculous, cancerous, exanthematous, diphtheritic, mycotic, traumatic, and other less important

conditions. We must recognize the peculiarities of various tumors; the condition of the numerous sinuses (accessory to the nose and throat), excessive or scanty secretions and their character, empyema, necrosis, etc.

We have coryzas, congestions, inflammations, hypertrophies, hyperplasias, atrophies, and ulcerations; not only these special diseases of the nose and throat, but many so-called constitutional diseases which affect these organs seriously. Of the two hundred and fifty more or less distinct diseases that flesh is heir to, a large percentage show effects in the throat, not mere complications, but as a part of the disease; we look there for confirmation of our diagnosis.

There are never two noses alike interiorly, any more than there are two faces alike; it requires the exercise of good judgment and a moderate degree of skill, often, to distinguish pathological from physiological conditions. Cultivated common sense is never out of place when called in consultation to a case of ordinary nasal catarrh.

That which in common parlance is termed catarrh is but a symptom, an expression or effect of a diseased condition. We do not think of bleeding as a disease, but as a result of traumatism or other cause. In the popular mind catarrh means indefinitely (as charlatans teach) a blood disease, a bad breath, difficult nasal respiration, a dry throat, enlarged tonsils, or bad taste. Patients will tell you their palate is down (meaning an elongated uvula), that they have pain in the nose, over the eyes, in the temples, or back of the ears; that they have a hacking cough, a frequent desire to clear the throat, and point to the suprasternal notch, saying, "There is all the trouble." These ills may result from one and the same cause; and I desire especially to emphasize the importance of determining first of all the cause of that of which the patient complains.

Having determined the cause, we seek to remove it. If it is a syphilitic sore throat, give "mixed treatment" if you wish, but you will oftener get positive results from the use of large, increasing doses of potassium iodide. I am in the habit of ordering twenty grains, in solution, to be taken in a glass of milk before eating, three times a day. This quantity is to be increased five grains each day until the desired effect is produced, unless