## COMBINED EMPYEMA OF THE LEFT FRONTAL AND ETHMOIDAL CAVITIES.

BY

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Mrs. B. C., a woman forty-five years of age, was referred to me by Dr. Spier for examination of the nose and throat.

The patient stated that she was suffering from intense pain in the forehead, localized chiefly over the left frontal region. The present illness began about ten years ago with severe headaches. The pain was very severe and of a neuralgic character and would last for hours, then gradually disappear, leaving a throbbing sensation in the head particularly over the frontal region. When the pain was most severe it was accompanied by attacks of vomiting. The vomiting would continue until the patient was so exhausted that she would fall asleep. patient states that she was treated by several physicians for neuralgia of the face and head for a period of five years and was then referred to a special hospital clinic in this city where she was examined by an ophthalmic surgeon who stated that the pain was caused by diseased teeth. The teeth in the upper jaw were removed, and the patient experienced considerable relief from pain for one month following extraction. The headaches then recurred with greater intensity, and the pain was becoming so pronounced that she was afraid that she would lose her reason.

Examination revealed a fairly healthy woman. Her cardiac system showed mitral incompetency, no enlargement, compensation good. The other organs so far as could be ascertained were normal. Pressure over the left frontal bone and inner angle of the left eye caused excruciating pain. Examination of the nose disclosed a chronic rhinitis with pus in the left middle meatus, and an enlarged left middle turbinal bone, which was pressed outward by a dilated ethmoidal bulla, as shown roughly in the accompanying diagram.



Superior turbinal
Middle turbinal
Enlarged (bulla) bulla
Unciform process
Hiatus semilunaris

Examination with electric light was positive both in the left infraorbital and frontal regions, but negative as regards the antra, which was confirmed by exploratory puncture, after the nose had been thoroughly cleansed. I advised an immediate operation upon the ethmoidal and frontal cavities. The patient readily consented. On the 26th of Janu-