

lowered power of resistance, and are specially liable to paralysis of the heart.

The immediate effect of tonsillar hypertrophy is, of course, mouth breathing, and this indirectly leads up to well-marked chest deformities and to a characteristic facial expression. The child becomes dull, stupid looking, answers slowly; lips become thick and altogether may present the picture of one both mentally and physically stunted.

It is interesting here to note that Hutchinson has suggested that the embryological relationship of tonsillar tissue with the pituitary body may account for the interference with development.

Dupuytren, in 1828, drew attention to the chest deformities associated with enlarged tonsils, and it is now well recognized by physicians that the Pigeon Breast, the Barrel Chest and the Funnel Breast are largely induced by naso-pharyngeal obstructions.

In the Pigeon Breast, the sternum is bulged forward and Harrison's groove (diaphragm attachment), deeply marked. In a mouth breather, one can see the lateral regions retracted during inspirations by the diaphragm.

The Barrel Chest is brought about by the recurring attacks of asthma and consequent emphysema, due to the chronic naso-pharyngeal irritation and obstruction.

In the Funnel Breast there is a deep depression at the lower sternum, and there seems every reason to believe that obstruction to the breathing, due to adenoids, is a main factor in its production.

In mouth breathers, we also recognize a nasal quality in the voice, and stuttering is undoubtedly associated with it in some cases, the hearing is often impaired, and I think physicians will bear me out in saying that their little patients have often ceased complaining of headaches and facial muscle spasms by clearing away the obstructions to breathing.

The physician also is often consulted in regard to a fetid breath, which is found to be due to cheesy deposits in the tonsillar crypts.

A consideration of all these facts makes one think Catlin was not so far astray when he said, "Shut your mouth and save your life."

It is interesting here to note the results of attending to the cases of enlarged tonsils in the school children of New York City.

"Mayer" says that some of the children after operation showed an improvement of 100% over their former ability to work and in behavior, from the simple removal of hypertrophied tonsils. Within six months, 76 out of 81 operated on at one time had been promoted and were doing well in the advanced grades.