Society proceedings

ROYAL SOCIETY OF MEDICINE

SECTION OF OTOLOGY MEETING—2 MARCH 1973

Discussion on Paper by Mr. Fred Shah,

Mr. A. Morrison said that Mr. Shah was to be congratulated on his paper and upon the satisfactory results. Second-look surgery following stapedectomy does not carry a very good prognosis from the view point of marked hearing gain and success in 40–50 per cent of such operated cases is very acceptable. Early failures after stapedectomy are usually either sensorineural or conductive and present little diagnostic difficulty. In the case of late failures the auditory picture is frequently less well defined; if the other ear is unoperated and shows a marked conductive loss, adequate masking is almost impossible; in these circumstances a late post-operative sensorineural or mixed deafness can readily be re-explored in the false belief that a conductive deafness is present. Compliance measurements and Speech Discrimination scores can add useful information. There may, of course, be other indications for surgery, e.g. relief of vertigo or closure of a fistula. Otologists and patients should have as much information as possible about the prognosis before revision operations.

Other contributions were

(1) Cartilage in Tympanoplasty. A film by M. A. O'Brien.

(2) Acoustic Impedance Bridge Measurements with the Neonate. M. J. Bennett.

(3) Otosclerosis presenting with advanced deafness. W. G. Edwards and H. R. Grant.

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