A NOTE ON THE DIRECTOSCOPE.

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THE Directoscope is an instrument, designed by Dr Haslinger of Vienna, for the direct examination of the larynx. As the instrument does not seem to be well known in this country, a short description, so it seems to the writer, may be of interest.

The Directoscope was introduced by its inventor nearly a year ago and embodies a new principle in laryngeal examination,

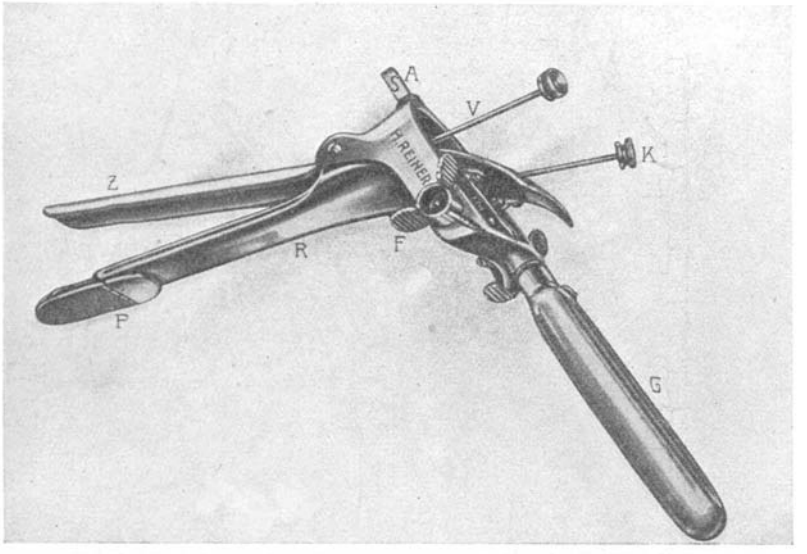


FIG. 1.—The Directoscope.

because it utilises the anterior surfaces of the vertebral bodies which are on a level with the posterior surface of the cricoid cartilage in the hypopharynx, making them act as a fixed point for counter-pressure, in order to press forward the base of the tongue and expose the larynx to view.

The instrument, Fig 1, consists of a channelled metal strip, Z, which acts as a tongue spatula; a pharynx spatula, R, which lies directly above it, the two forming a split tube. At the end of the pharyngeal spatula is a movable plate, P, which is passed into the hypopharynx. These two spatulæ, which are hinged at the proximal end can be separated by a winged

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screw, F. The advancing rod, V, is the means by which the hypopharyngeal plate is pushed home after the instrument is in position. The instrument can be used either with the patient sitting or lying down, the only adjustment required being the alteration of the position of the handle. In Fig. 1 the instrument is adjusted for the supine position; when the patient is sitting up the handle is attached to the connecting bolt, A. For illumination a head mirror can be used or an

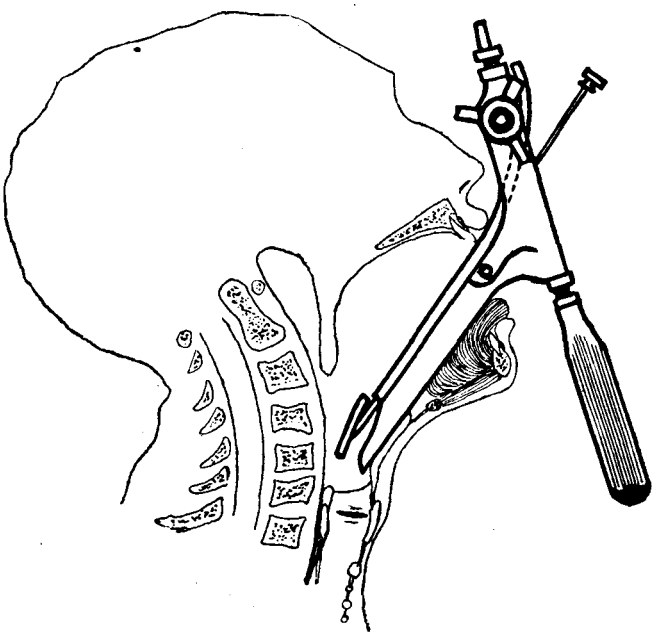


FIG. 2.—The position of the instrument before the hypopharyngeal plate is pushed into its place.

electric lamp can be fitted to the handle connecting bolt, which is not in use.

The instrument is easily employed under cocaine anæsthesia, but a preliminary injection of morphia and atropine is helpful in nervous patients or in those who have much salivary or laryngeal secretion.

The method of using it in the sitting position is as follows. The patient's head should not be fully extended; the two spatulæ are approximated as much as possible by the winged screw adjustment, and the advancing rods of the hypopharyngeal plate, which slide it on to the pharyngeal spatula, are drawn

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back to their full extent. The instrument is held in the right hand and is passed in the middle line over the base of the tongue and epiglottis (Fig. 2). Directly the arytenoids come into view it is not thrust any farther, but the advancing rod is now pressed home to its full extent (Fig. 3) and thus slides the movable plate into the hypopharynx. Next, the winged screw is turned, separating the two spatulæ, and as the vertebral bodies are fixed, pressure is exerted by the tongue spatula on

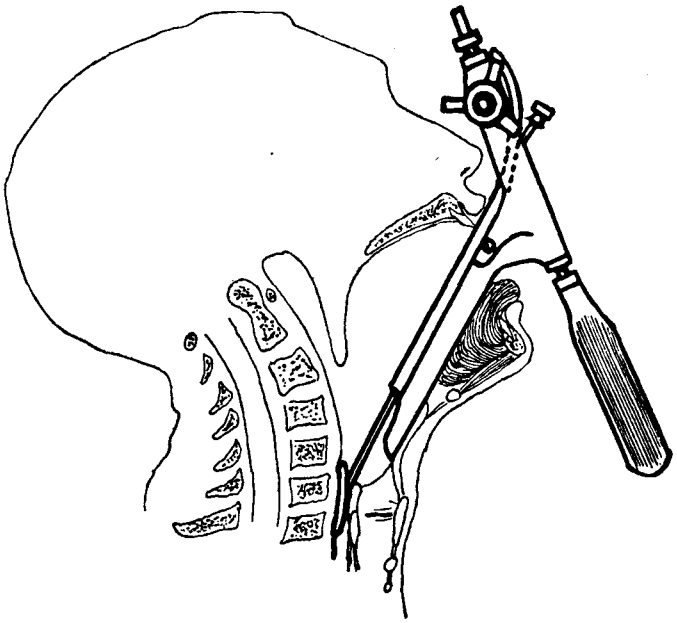


FIG. 3.—The hypopharyngeal plate in position.

the base of the tongue, which is pressed forward exposing the larynx (Fig. 4).

The instrument is now firmly fixed in position so that both hands are quite free. If a more extensive view is required, pressure on the sides of the thyroid cartilage in the neck with the finger brings either side of the larynx more fully into view, or, pressure backwards with the finger on the thyroid notch gives a more extensive examination of the anterior part of the larynx.

Withdrawal is effected by closing the spatulæ with the winged screw and then the instrument is removed from the pharynx; it is not necessary to pull back the hypopharyngeal plate.

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The writer has only had a limited experience with the Directoscope, but it seems to offer several outstanding advantages over its predecessors in the direct examination of the larynx. In the first place it is self-retaining when fully in position, so that it leaves both hands free for manipulation. There is no elaborate apparatus to alarm a nervous patient as

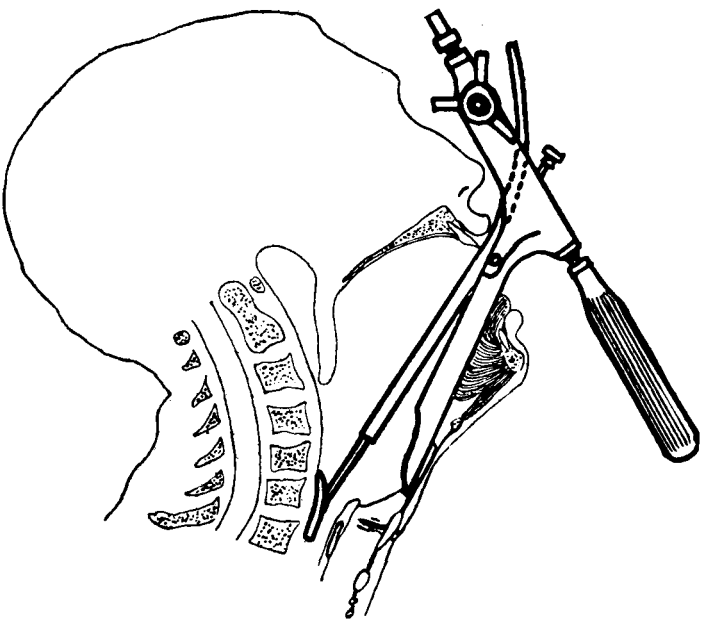


FIG. 4.—The final position showing the spatulæ separated.

in suspension laryngoscopy, and the view obtained is certainly more extensive than with the latter method. It is very portable and compact, and its price is not prohibitive.

The only contra-indication met with so far has been in post-cricoid growths, which are apt to bleed freely when an attempt is made to push home the hypopharyngeal plate

The Directoscope is made by H. Reiner, Vienna, and costs (in Vienna) about £7.

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