100 YEARS AGO

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As we approach the Millennium I thought it would be interesting to see what our forebears were writing about 100 years ago. The Journal of Laryngology, Rhinology and Otology was then published by Rebman Publishing Company, Limited, 11 Adam Street, Strand, London, W.C.—Editor

PERIPHERAL POLYNEURITIS OF THE AUDITORY AND LARYNGEAL NERVES

By DUNDAS GRANT

Those who finished their medical education twenty years ago, or even less, may never have heard of the disease now so well known as "peripheral polyneuritis," and may have missed the flood of light which its recognition has cast upon many obscure and apparently hopeless cases of disease. The present writer's experience would lead him to class its discovery along with that of the treatment of myxoedema, as among the most brilliant practical additions to medical knowledge acquired since his entrance into active medical life. The latter is fairly obvious, and restricted to a comparatively limited number of individuals. Peripheral neuritis, on the other hand – and especially that form of it arising from alcoholic poisoning – is insidious, and apt to be overlooked; but it is frequently to be found when looked for, and the results of its treatment when detected may be described as little short of marvellous.

That the nerves connected with the organs studied in our speciality should be attacked by this disease is no matter for surprise, and it is only strange that references to such conditions should be so few in number.

Alcoholic paralysis of the auditory nerves has received study at the hands of Prof. Kiesselbach, and his observations were brought before the notice of the South-West German Society of Neurologists and Alienists by Prof. Stumpell ("Neurologisches Centralblatt," p.610, and "Lancet," 1897, Vol.II., p.553). The condition is a true nerve deafness; it tends to pass off in three weeks and to be replaced by noises in the ear. Its occurrence as a possible cause of nerve deafness or tinnitus ought to be kept well in mind by the otologist in those cases – alas, how many, in which the diagnosis is obscure and the results of treatment disappointing. Dr Ferdinand Alt has also published the particulars of a case of alcoholic neuritis of the auditory nerve in which the ophthalmoscopic examination afforded the most valuable confirmation of the diagnosis.

Two cases in which paralysis of the left vocal cord was with every apparent probability due to alcoholic neuritis of the recurrent laryngeal nerve, were described by the writer in a paper read before the French Laryngological and Otological Society in April of this year. The after history confirmed the diagnosis, and the cases appear almost unique in literature, though perhaps they may have been more frequently observed than described.

To redeem specialism from the suspicion of narrowness, or what Sir William Gowers has termed exclusivism, the specialist must take account of every advance in general medicine and surgery; and to the otologist and laryngologist we cannot too strongly recommend a careful study of the general history of the disease known as poly- or peripheral neuritis.

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