Societies' Proceedings

VIENNA LARYNGO-RHINOLOGICAL SOCIETY.

MEETING OF 2ND JUNE 1931.

(*Monatsschrift für Ohrenheilkunde*, January 1932.)

Abstracted by ALEX. R. TWEEDIE, F.R.C.S.

Melano-Sarcoma of Left Tonsil—C. WIETHE.—Seven years previously similar infection of the right inferior turbinate and the right maxillary sinus. Operative removal after treatment with radium. Recovery.

As the result of the previous treatment, no trace of the original lesion in the right side of the nose could be seen when the patient was examined by the exhibitor (Christmas 1930). Since then, however, the patient, a woman (age not given) had suffered from difficulty in swallowing and noticed a swelling in the left side of the neck. There was now a tumour the size of an egg to be seen in the left side of the soft palate, thrusting the tonsil over the middle line, and a palpable gland was found below the angle of the jaw, on the same side. The appearance of the neoplasm suggested sarcoma.

In order to determine the nature of the lesion the gland was extirpated, and its naked-eye appearance at once confirmed the suspicion of melano-sarcoma.

The exhibitor emphasised the great interest attached to this case, since after an apparently complete recovery from removal of the growth from the right side of the nose seven years ago, a similar lesion had now occurred in the left tonsil, and he raised the point as to whether this should be regarded as metastasis or a separate new growth.

In the discussion which followed, Hajek stated that in his opinion such a question could not be answered with certainty. In reply to a further question, Wiethe said that he proposed to rely on X-rays for further treatment, as the propinquity of the growth to the carotid vessels would render any operative attempt at removal too dangerous.

Re-formation of the Œsophagus by Roux's Method—C. WIETHE.—Unfavourable functional condition after many years. Recent treatment by dilatation of the original œsophagus.

The case concerned a woman, aged 24, who, owing to the accidental swallowing of lye ten years ago, had severe stenosis towards the lower end of the œsophagus. In spite of repeated dilatations carried out by means of an endless dilator after gastrostomy, even fluids could scarcely be passed. Professor Hacker of Graz had adopted Roux's plastic method, which entailed several operative procedures — the new œsophagus being fashioned from a portion of the large bowel. The

https://doi.org/10.1017/S0022215100037476 Published online by Cambridge University Press

function of the new "œsophagus" was, however, impaired, owing to a valve-like formation at its upper end.

In order to relieve difficulty in swallowing, the exhibitor decided to attempt further dilatation of the original stenosis at the lower end of the normal œsophagus with conical bougies loaded with lead, and was pleased to be able to report that at the present time there was already a good prospect of a favourable result.

He would, however, draw attention to the fact that, owing to the repeated operations on the left side of the neck entailed by Roux's method, a paralysis of the left recurrent nerve had resulted, and this caused difficulty in breathing. This latter condition Marschik had already traced to the result of pressure effects on the new tube.

In the discussion which followed, Marschik suggested that from the account of the case, and particularly owing to the fact that the stenosis was definitely permeable, it was difficult to appreciate the reason for the previous severe plastic operation.

False Tumour of the Epipharynx — K. M. MENZEL. — A histological preparation was shown of a pedunculated tumour the size of a large bean—which was situated in the posterior wall of the naso-pharynx and hung down in the throat. The tumour consisted mainly of adenoid tissue covered with flattened epithelium. The patient stated that she had undergone operation for removal of adenoids about a year previously.

Marschik stated that such tumours of adenoid tissue were not infrequently seen after removal of adenoids, and that this condition was most often associated with Beckmann's ring knife being used with undue force. One should be very careful in using it, and it was especially important to disengage it very quickly from the posterior pharyngeal wall. Further, severe scarring of the fascia of the pharynx was not uncommonly seen with the use of this instrument—especially if its action was continued too far downwards. In his opinion, Gottstein's knife was not so dangerous in this way.

Hofler stated that he had given up using Beckmann's knife and had adopted St Clair Thomson's curette, from which, however, he had the hooks removed, as he had seen two cases of severe injury which he had attributed to this portion of the instrument.

If, however, such remnants of adenoids required removal, he was in the habit of using Fein's scissors, after lifting up the soft palate with a suitable retractor.

Carcinoma of the Hypopharynx treated with Radium— K. M. MENZEL.—A microscopical preparation was shown from a man, aged 69, who was unable to be brought to the meeting owing to his general condition. Ten years previously he had undergone treatment

https://doi.org/10.1017/S0022215100037476 Published online by Cambridge University Press

by X-rays over a period of two years for the cure of lupus on the right side of the neck. Seven months ago the patient had applied for treatment, complaining of pain in the right side of the neck on swallowing. Examination disclosed a tumour on the posterior wall of the right side of the hypopharynx. The histological report on a portion removed for examination was squamous-celled carcinoma.

As the condition of the patient was so poor, the exhibitor had avoided radical operation and relied on the use of radium, and, at intervals of two weeks to two months, five or six needles were inserted into the growth, on an average for about five hours at a time, amounting in all to a dosage of about 800 mgrm.-hours. After the fourth treatment no sign of the tumour could be seen. A short time after, however, another tumour quite separate from the first appeared in the sinus pyriformis, but this, unfortunately, did not respond to the further introduction of radium needles. Thus, after disappearance of the primary tumour, a metastasis had apparently occurred in a situation which is recognised as being highly susceptible to such affections.

The exhibitor discussed the possible causative relation between the previous X-ray treatment and the development of the neoplasm in the hypopharynx.

ABSTRACTS

EAR.

Function of the Round Window: An Experimental Study. WALTER HUGHSON and S. J. CROWE (Baltimore). (*Journ. Amer. Med. Assoc.*, 13th June 1931, Vol. xcvi., No. 24.)

In these experiments cats were used, because of the ease with which the cerebellum and middle ear are approached. The experiment consisted in placing an electrode on or near the auditory nerve, and grounding the other electrode in the muscles of the neck. Wires from these electrodes were connected with a six-tube amplifier in another part of the building. Spoken words and pure tones from various instruments were used. Seventy-five experiments were made, after which the cats were killed, and in addition a considerable number of animals were operated on and saved for observations on chronic lesions. Puncture of the ear-drum or filling a niche of the round window with wax or plaster had no appreciable effect on the transmission of sound. Fixation of the ossicular chain, division of one of the ossicular joints or interference with the movements of the head of the malleus decreased transmission of sounds, particularly those of low frequencies. Pressure on the round window membrane always resulted in marked improve-

https://doi.org/10.1017/S0022215100037476 Published online by Cambridge University Press