

UNIVERSAL SYRINGE FOR EAR, NOSE AND THROAT.

DR. P. SCHOONMAKER, New York City.

This instrument meets all the requirements for cleansing treatment of the ear, nose and throat, and is the only instrument combining these qualities on the market.

It is made of hard and soft rubber and has no loose joints, cavities or rough places to retain infection. It is simple, durable, easily cleansed and sterilized, does not get out of order, and requires no additional means for its use.

The instrument consists of a firm, pear-shaped rubber bulb of six-ounce capacity, made of the best rubber. The small end is reinforced and fits closely to and is cemented to the neck of a hard rubber pipe. The pipe is five inches long and is bent to an angle of forty-five degrees. The proximal end of the pipe has a neck and shoulder for attachment to the bulb. The distal, or small end, is ground even to make a friction joint with the tips.

The tips are made to conform to the end of the pipe and are held firmly by the friction joint. There are five tips which are designated by letters.

The nasal tip (N) is of hard rubber, conical in shape, the end being contracted to conform to the nasal opening of an adult or child.

The ear tip (E) is made of soft rubber, is acorn in shape with a small tubular extension to introduce into the external aural canal, but will not reach the drum membrane. With this tip attached to the bulb, the physician or patient can thoroughly cleanse the external canal of the ear with a warm antiseptic or aseptic solution thrown into the ear by compressing the bulb filled with the fluid with sufficient force to cleanse the parts of secretions or foreign body, or to irrigate the ear in diseased conditions. The middle ear can be aspirated of secretions when there is a perforation of the drum membrane, or after a paracentesis. Where there is a small perforation, it should be enlarged to give free drainage. In aspirating the middle ear, the bulb should be compressed, and the ear tip pressed well into the canal and allowed to expand. If it does not, withdraw it a little allowing some air to enter the canal. The bulb expands with enough force to produce a vacuum in the canal and aspirate the secretions into the outer ear, but not into the

bulb; the next syringeful cleanses the canal of secretions and again aspirates the middle ear on allowing the bulb to expand. Cases with acute or chronic otitic discharge heal more quickly when this manner of treatment is carried out than with the usual routine method of cleansing, as it is assisting Nature's method of freeing the parts of irritating discharges without force enough to do damage to the ear. This instrument can safely be placed in the hands



of patients giving them instructions and showing them how to use it.

The throat tip (T) is an oval, spatula-shaped tube of hard rubber with expansion of the end and several large perforations. With this tip attached to the bulb a coarse spray can be thrown into the larynx. This tip can be used in children and adults when they are unable to gargle.

The post-nasal tip (PN) is a hard rubber tube with perforated end bent upward. With this the naso-pharynx can be thoroughly cleansed.

The Eustachian tip (EU) is of soft rubber, the distal end fits into the end of an Eustachian catheter, and is used with the bulb to inflate the middle ear, or aspirate mucus from the pharyngeal end of the tube. With this method one can estimate quite accurately the amount of pressure required to open the tube. This tip can also be used with proper canula to wash out any of the facial sinuses.

This instrument can be used as a Politzer bag or for pressure for the fistula test of the semicircular canal.

There is no other instrument on the market that combines all these qualities for cleansing treatment of ear, nose and throat.

Unless otherwise ordered, it is put up with the aural and nasal tips. Careful directions are furnished with each syringe. It is sold under the name of Schoonmaker's syringe for ear, nose and throat.

Manufactured and sold by the Euclid Rubber Company, 2345 Broadway, New York.

Broadway and Eighty-sixth Street.

Spasmodic Retraction of the Esophagus in a Child of Sixteen Months. LAROZIERE. *Revue hebdomadaire de Laryngologie*. March 28, 1914.

Spasmodic retraction of the esophagus is characterized by a constriction of the pharyngo-esophageal canal more or less prolonged. It is rarely idiopathic and nearly always symptomatic of some general or local condition, sometimes being the only manifestation of a neurosis.

In the case reported the paroxysms had developed after the swallowing of a button by the little patient and, continuing for 25 days, had resulted in marked emaciation. Two radiographs were made without results and the esophagoscope failed to show a foreign body or ulceration, but the passage of the tube was followed by gradual improvement and a week later the symptoms had disappeared. The spasm had evidently been produced by a foreign body and had persisted after its spontaneous expulsion.

SCHEPPEGRELL.