REPORT OF A CASE OF BLEEDING FROM THE LINGUAL TONSILS.

BY HAL FOSTER, A.B., M.D.,

Laryngologist to St. Margarets, All Saints, Missouri Pacific and Memphis Hospitals; Secretary of Western Ophthalmological, Otological, Laryngological and Rhinological Association, Kansas City, Mo.

In 1877 Heyman called the attention of the medical profession to diseased conditions of the lingual tonsils. The base of the tongue is covered with lymphoid tissue, called lingual tonsils.

I trust that the report of the following case will demonstrate how necessary it is to understand diseased conditions of these tonsils. It will also show how much annoyance is caused thereby:

March 5th, 1896, Miss R., age 25, from western Missouri, was referred to me by my old friend, Dr. Willis P. King, of this city. She was a country school teacher. Family history good. The patient was pale; appetite poor; and was unable to sleep at night. The last month or two a hacking cough had annoyed her constantly. Her expression was anxious, and she presented all the appearance of a patient suffering with some incurable malady. There was pain on deglutition. She was in constant dread of being suffocated, and complained of a "tightness" of the throat. This condition had brought on neurasthenia. There was a constant desire to swallow. Three or four times daily, during the coughing, profuse bleeding would set in, which always frightened her greatly.

Her friends, as well as herself, had arrived at the conclusion that she would die in a few weeks of tuberculosis. In other words, she was almost a complete physical wreck. The lungs were found to be perfectly normal. On a careful examination of the nostrils, I found her to be suffering with hypertrophic rhinitis. This condition caused her to take cold on the slightest exposure or least change of temperature. Her throat was now carefully examined with the laryngoscope; the lingual tonsils were found to be very much enlarged. They were so badly irritated as to bleed when touched by a laryngeal cotton applicator. All the veins here were swollen, which accounts for the bleeding from her throat. In my experience, complete removal is the only remedy for this distressing trouble.
There are several methods of doing this, namely: chemicals, snare, knives, and the galvano-cautery. I have been in the habit of using the latter exclusively. In using the galvano-cautery great care should be exercised not to burn the epiglottis. The parts should first be made anesthetic by applying a 10-per-cent. solution of cocaine or eucaine.

After this treatment the patient will be obliged to take liquid diet for a few days. If great care is exercised the use of the cautery always gives rapid and brilliant results.

After explaining the difficulty to the patient and friends, and informing them as to the remedy, a 10-per-cent. solution of cocaine was applied directly to the diseased parts, and the galvano-cautery was applied with great care twice a week until each vein had been removed.

For the first week she was given milk, and antiseptic sprays were given frequently during the day. Tonics of iron and strychnine were given, and daily walks in the air. After the first treatment the bleeding and cough ceased, and with it the great anxiety left the lady. Sleeping was now a pleasure. Her appetite rapidly returned, and she gained in flesh, and walked to my office daily for two months. In her case the galvano-cautery was applied to a small place only at each treatment. This was done in order not to shock her too much or make the throat too sore. She returned home entirely well, and to-day is one of the most grateful patients I have ever treated.

In reporting this case I do not mean to say that the lingual tonsils always bleed when diseased. I do insist that in all obscure coughs or bleedings from the throat a careful examination should be made of these tonsils.

Dr. W. L. Dayton, of Lincoln, in Journal of Laryngology and Ophthalmology, October, 1892, reports cases. I am under obligations to Dr. J. C. Stewart for drawing the accompanying cut.

11th and Walnut Sts., Altman Building.
PLATE I.

Varicose Blood-Vessels at the Base of the Tongue.