TABLES

SHOWING THE SIGNS OF

"LATENT" SUPPURATION IN THE VARIOUS SINUSES OF THE NOSE,

ILLUSTRATING DR. DUNDAS GRANT'S LECTURES ON THE DISEASES
OF THE ACCESSORY SINUSES OF THE NOSE,*Delivered at the Central London Throat and Ear Hospital
on June 9, 16, 23, and 30, 1897.*

THE tables here appended may be found useful to those who are engaged in the study or teaching of rhinology, and are founded mainly on the extremely lucid analysis of the subject as dealt with by Dr. Lermoyez in his work on the "Treatment of Diseases of the Nose," published in 1896, and reviewed by the present writer (JOURNAL OF LARYNGOLOGY, vol. xii., p. 105). The extreme shortness of the headings adapts them for reproduction on charts for hanging on the wall, as used by the author to illustrate his lectures.

SIGNS OF PURULENT SINUSITIS	SITE OF SINUSAL SUPPURATION.
PRESUMPTIVE :	
(a) Unilateral pus.	PUS IN MIDDLE MEATUS :
(b) Pain relieved by evacuation.	Anterior group :
(c) Subjective factor.	Antrum.
(d) Polypi.	Anterior ethmoidal cells.
PROBABLE :	Frontal sinus.
(a) Pus at orifice influenced by attitude.	PUS IN OLFACTORY SLIT :
(b) Opacity on transillumination.	Posterior group :
CERTAIN :	Sphenoidal sinus.
(a) Irrigation.	Posterior ethmoidal cells.
(b) Puncture and aspiration.	
(c) Puncture and irrigation.	
(d) Puncture and transsufflation.	

ANTERIOR GROUP.

SIGNS OF SUPPURATION OF ANTRUM.	SIGNS OF SUPPURATION OF FRONTAL SINUSES.
PRESUMPTIVE :	PRESUMPTIVE :
(a) Unilateral pus.	(a) Continuity of discharge.
(b) Intermittence.	(b) Seat of pain.
(c) Infra-orbital pain.	(1) Spontaneous.
(d) Subjective factor.	(2) On pressure.
(e) Upper molar caries.	PROBABLE :
(f) Pus in middle meatus.	(a) No return on bending forwards.
(g) Mucous polypi.	(b) Return after antral irrigation.
(h) Lateral swelling.	(c) Pus on tampon in hiatus.
PROBABLE :	(d) Transillumination.
(a) Return on bending forwards.	Antrum—negative.
(b) Opacity on transillumination.	Frontal—positive.
CERTAIN :	CERTAIN :
(a) Puncture and transsufflation.	(a) Catheter.
(b) Puncture and irrigation.	Inflation.
(c) Puncture and aspiration :	Irrigation.
(1) Inferior meatus.	(b) Operation.
(2) Alveolus.	
(3) Canine fossa.	
(4) Middle meatus.	
(d) Catheterization, inflation, irrigation.	

SIGNS OF SUPPURATION OF ANTERIOR ETHMOIDAL CELLS.

PRESUMPTIVE :

Pus continuous.

Pain.

Spontaneous supra-orbital.

On pressing lachrymal bone.

Asthenopia.

Mental depression.

PROBABLE :

Opacity on transillumination.

Lesions in middle meatus.

Anterior rhinoscopy — pus,
granulations.

Probing—pus, blood, bare bone.

CERTAIN :

Puncture of bulla.

Elimination of antrum.

(Exploratory irrigation.)

POSTERIOR GROUP.

SIGNS OF SUPPURATION OF
SPHENOIDAL SINUS.

PRESUMPTIVE :

(a) Pain.

(b) Ocular disturbance.

PROBABLE :

Pus.

(a) Between septum and middle
turbinal (ant. rhinoscopy).(b) On superior and middle tur-
binals and vault (posterior
rhinoscopy).

Lesions in olfactory slit.

(a) Bulging in depth (in acute
cases).

(b) Mucous polypi.

CERTAIN :

(a) Pus from ostium seen.

(b) Exploratory catheterization.

(c) Exploratory puncture.

SIGNS OF SUPPURATION OF
POSTERIOR ETHMOIDAL CELLS.

PRESUMPTIVE :

Same as sphenoidal.

PROBABLE :

Polypoid middle turbinal.

CERTAIN :

Return of pus after irrigation of
sphenoid.

Bare bone behind middle turbinal.

TREATMENT OF LARYNGEAL PHTHISIS.

*Abstract of Paper read at West London Medico-Chirurgical Society,
January 7, 1899.*

BY R. LAKE, F.R.C.S.

ALTHOUGH general treatment was useless, one must not lose sight of the enormous aid one derives from increasing the powers of resistance in the body, and by increasing the numbers and energy of phagocytes and white corpuscles.

Local measures can be divided into surgical and non-surgical. The former consist in removal of diseased portions, cleaning up of ulcers, etc., by means of curettes, and depletion of œdematous tissues by puncture. Non-surgical consist of insufflation of powders, painting on or rubbing in of solutions, the injection into the tissues