

BRITISH MEDICAL ASSOCIATION.

ANNUAL MEETING, HELD AT PORTSMOUTH, AUGUST 1 TO 4.—
SECTION OF LARYNGOLOGY AND OTOTOLOGY.

THIRTY YEARS' PROGRESS IN RHINOLOGY.

AN ADDRESS BY

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GENTLEMEN,—In opening the work of this Section, it may not be out of place if I make a few remarks on the development of Rhinology during the last thirty years.

It is just thirty years ago that Wilhelm Meyer, of Copenhagen, brought his eventful discovery of adenoid vegetations to this country, and read a paper on it before the Royal Medical and Chirurgical Society in London on November 23, 1869.* He had previously published an article in the *Hospitals Tidende* (1868), and subsequently wrote a long monograph on the subject in German in the *Archiv für Ohrenheilkunde* of 1873. Meyer, as I remember him in Copenhagen in 1874, was a charming personality, enthusiastic in his work, and full of energy, with, as he himself described it, his heart in his general practice, his intellect in his special work. Meyer's paper, which forms a landmark in modern Rhinology, appears to have attracted little immediate attention in this country, and it was not till some years after its publication that we find any original articles on the subject in England. Meyer, as he acknowledges, had been preceded in his discovery by the publication of scattered cases of adenoid vegetations by several observers, notably by Voltolini and by Loewenberg; but for an exhaustive study of the disease, both as regards diagnosis, prognosis, and treatment, and for a recognition of its great importance and far-reaching effects, we are undoubtedly indebted to Wilhelm Meyer, who, as Mackenzie says, may be justly considered as the discoverer of these growths. Meyer recognised his first case by palpation, and laid great stress on this mode of examination. His description of this disease was so full and complete, that except in pathology and treatment, no material advance has since been made. Numerous fresh instruments have, as you

* *Medico-Chirurgical Transactions*, vol. liii.

are aware, been devised for the operative treatment of adenoids, and removal under general anæsthesia is now an everyday occurrence. The use of general anæsthesia was, I believe, first practised in this country, one of the pioneers being Dr. Woakes, who, as mentioned in a paper on adenoid vegetations which I wrote in 1882,* had been using anæsthetics for the purpose, to a considerable extent before that date.

The way for Meyer's discovery had been paved by the invention by Czermak some ten years previously of the art of posterior rhinoscopy. Voltolini, who published his first work on rhinoscopy in 1861,† began to work at this subject soon after Czermak, and was an ardent advocate for many years and in many writings of this method of examination. To him we are indebted for insisting on the importance of the palate-hook, although one had been previously used by Czermak. Voltolini emphasized the fact, that firm pressure with the hook was better borne than slight irritation, and therefore advocated the use of a large, strong hook drawn rapidly and firmly forwards. It was not, however, till more than twenty years afterwards when White, of Richmond (Virginia), and others introduced the self-retaining palate-hook, employed after cocaineization, that the full benefit of this method of examination was apparent, and I think that, even now, the value of this instrument is insufficiently taught in our schools, as it can be so easily employed on almost any patient, and gives an insight into the naso-pharyngeal cavity obtained by no other means. This instrument alone enables us to fully examine with the eye the posterior wall of the cavity; otherwise the view of the latter obtained in the mirror is usually too foreshortened to be of much value. Of Voltolini it has been truthfully said in a recent work:‡ "In the course of a long and laborious life he has presented science with many valuable observations; even where he errs, he is more instructive than the eclectic, from whom we only obtain a selection of opinions current at the time, without meeting with any original thought."

Anterior rhinoscopy, which is, of course, of much older date, cannot, singularly enough, be said to have been much cultivated in modern times until 1859, when Markusovsky invented the speculum bearing his name. Thudichum of London, and Duplay of Paris,

* "Remarks on Adenoid Vegetations of the Naso-Pharynx," *British Medical Journal*, August 5th, 1882. See also paper by Dr. Woakes, *Transactions of the International Medical Congress, London, 1881*, vol. iii., p. 291.

† "Die Rhinoscopie und Pharyngoscopie," *Festschrift*, Breslau, 1861.

‡ *Handbuch der Laryngologie und Rhinologie*, edited by P. Heymann, vol. i., p. 32. Article by P. Heymann and E. Kronenberg.

both published accounts of their specula in 1868, instruments which, for their purpose, cannot be improved on at the present day. Fränkel's speculum dates from 1872. But real advance in anterior rhinoscopy was, I think, more due to the use of light reflected from a mirror with a central perforation than to any special form of speculum.

In 1882 the study of anterior rhinoscopy, and of nasal diseases generally, received great impetus from the well-known researches of Zuckerkandl on the normal and pathological anatomy of the nose and its accessory sinuses. The next most noticeable event in rhinology was the ardent championship of reflex nasal neuroses by Hack, of Freiburg. In an able brochure published in 1881, and in numerous other papers, Hack contributed abundant material on the subject, and albeit his theories were not all sound, still, a valuable substratum of truth, sifted by later observers, remains, for which we are indebted to this brilliant worker. Amongst other things, Hack's theories led to an extended use of the galvanic cautery, invented by Middeldorpf some years before, and much employed by Voltolini. Moderation in regard to its use has now happily set in, and it is not used so promiscuously as I am afraid it was at one time. It may be mentioned that before Hack both Voltolini and B. Fränkel had drawn attention to the relation existing between asthma and certain forms of nasal disease. Very shortly after this date rhinology was destined to undergo what amounted practically to a revolution by the introduction of cocaine. In 1884 Jellinek published an article on its use in the throat and nose. In spite of the originally high price, the employment of cocaine rapidly spread in this department, not only on account of its anæsthetic properties enabling numberless operations to be painlessly performed, but also on account of its contracting power on the nasal mucous membrane. Its value in the latter respect in enabling a successful examination to be made may be fairly compared to that of atropine in examination of the eye.

While all these rapid developments were taking place, with regard to the careful examination and treatment of the nasal cavities, the study of the various reflex neuroses connected with the nose, and the use and action of cocaine, a new phase of rhinology was springing up. I refer to the study of sinus diseases. Diseases of the accessory sinuses when producing gross extra-nasal lesions had been known from time immemorial, and many fearful and wonderful operations had been devised for their removal. But the study of diseases of the sinuses, especially chronic empyema with only nasal symptoms ("Latent Empyema," Lichtwitz), was

practically a new departure, and materially enlarged the scope of rhinology. The nasal cavities, as we can inspect them, were beginning to be regarded as only a small portion of the nasal tract, the gateway, as it were, to large and important cavities whose diseases merit careful study. Ziem, in his publications, dating from 1880 onwards, did pioneer work in latent empyema of the antrum, and was followed by a host of observers, who added largely to our knowledge. One of the most stimulating is Grünwald, and whilst his conclusions are doubtless some of them extreme, his work is highly suggestive, and has greatly increased the interest taken in the subject. All the different sinuses have been carefully investigated, including the frontal sinus, on some of the diseases of which we are about to hold a discussion.

Amongst other developments of modern rhinology may be mentioned the general recognition of the importance of nasal respiration, and the improvement of the means of treating various forms of nasal obstruction. The pathology of the nose has continued to advance *pari passu* with that of other parts, and bacteriology has been laid under contribution in investigating the diseases of this organ. The physiology of the nose has also been re-investigated.

In these few remarks I have merely attempted to point out some of the rapid strides which this speciality has made in the last thirty years, and in doing so have had to omit the names of very many successful workers, some of whom are honouring us with their presence at this meeting. This short sketch has, however, I hope, shown that the progress of modern rhinology is in nowise behind that of any of the other medical sciences, and I feel confident that by persevering, and judicious application of the general knowledge of medicine and surgery to this particular branch, the efforts of its many devotees all over the world will enable it to make as rapid progress in the future as has been accomplished in the past. If I have confined my remarks to rhinology, it is not that I consider it more important than laryngology and otology, but that a review of all three would have been impossible without encroaching unduly on your time.

Before concluding, I should like to express the pleasure that I feel at seeing so many of our foreign colleagues present, and to offer them a cordial welcome in the name of the Section, and an invitation to take part in the proceedings.
