

The Journal of Laryngology and Otology

EDITED BY
WALTER HOWARTH

ASSISTANT EDITOR
G. H. BATEMAN

WITH THE COLLABORATION OF
V. E. NEGUS R. G. MACBETH

Contents

THE SURGERY OF THE EAR IN THE MANAGEMENT OF INTRACRANIAL COMPLICATIONS OF CHRONIC SUPPURATIVE OTITIS MEDIA	TERENCE CAWTHORNE
THE COMPARATIVE PATHOLOGY OF OTITIS MEDIA—EXPERIMENTAL AND HUMAN	I. FRIEDMANN
LOCAL EFFECT OF VARIOUS SUBSTANCES ON THE SENSE OF SMELL	KAJ ZILSTORFF- PEDERSEN ✓
DIAGNOSIS OF ACOUSTIC NEUROMA	W. R. DENNY ✓
RADIOGRAPHY AS AN AID TO DIFFERENTIAL DIAGNOSIS BETWEEN OTOSCLEROSIS AND CHRONIC ADHESIVE PROCESS	C. A. HUTCHINSON ✓
CLINICAL RECORDS—	
PLASMACYTOMA OF NASAL SEPTUM	H. M. JAY ✓
LARGE HYPO-PHARYNGEAL POLYP IN AN AFRICAN	H. T. LAYCOCK ✓
SOCIETIES' PROCEEDINGS—	
THE SCOTTISH OTOLARYNGOLOGICAL SOCIETY	
GENERAL NOTES	

London
Headley Brothers Ltd
109 Kingsway WC2

Annual Subscription £3/3/0 net, U.S.A. \$10

Monthly, 7/6 net post free

The Journal of Laryngology and Otology

(FOUNDED in 1887 by MORELL MACKENZIE and NORRIS WOLFENDEN)

EDITED BY
WALTER HOWARTH

ASSISTANT EDITOR
G. H. BATEMAN

WITH THE COLLABORATION OF
V. E. NEGUS R. G. MACBETH

1. Original Articles are accepted on the condition that they have not been published elsewhere.

2. Manuscripts should be typewritten, on one side only of the paper, and well spaced. Captions to illustrations should be typed on a separate sheet and sent at the same time as original photographs etc.

The Harvard system of recording references should be used, e.g. GREEN, C., and BROWN, D. (1951) *J. Laryng.*, 65, 33. Abbreviations of Journals should follow the style recommended in *World Medical Periodicals*, published by World Health Organization 1952.

It is most important that authors should verify *personally* the accuracy of every reference before submitting a paper for publication.

3. Galley proofs and engraver's proofs of illustrations are sent to the author. Corrections, which should be kept to a minimum must be clearly marked, and no extra matter added. Proofs should be returned within 5 days.

4. Illustration blocks are provided free up to the limit of £5 per article; beyond this authors are expected to pay half the cost. Coloured illustrations will be charged in full to authors.

Blocks will normally be held by the Printers for three years after which they will be destroyed. Any author who has borne a part of the cost of his blocks is entitled to have these returned to him, but a request for this must be sent within three years of the appearance of the article, to HEADLEY BROTHERS LTD., 109 Kingsway London, WC2.

5. Orders for reprints should be sent when returning galley proofs, and for this purpose special forms are supplied.

6. Authors of original communications on Oto-Laryngology in other journals are invited to send a copy, or two reprints, to the *Journal of Laryngology*. If they are willing, at the same time, to submit their own abstract (in English, French, Italian, or German) it will be welcomed.

7. Editorial communications may be addressed to THE EDITOR, *Journal of Laryngology*, c/o HEADLEY BROTHERS LTD., 109 Kingsway London, WC2.

8. The annual subscription is three guineas sterling (U.S.A. \$10) post free, and is payable in advance.

9. Single copies will be on sale at 7s. 6d. each; copies of parts up to Vol. LXIII may be purchased at 4s. each.

10. All subscriptions, advertising and business communications should be sent to the publishers, HEADLEY BROTHERS LTD., 109 KINGSWAY LONDON, WC2.

United States of America

Orders for this *Journal* may be sent through local bookseller, or to STECHERT-HAFNER, INC., 31-33 East 10th Street, New York, or direct to the publishers, HEADLEY BROTHERS LTD. 109 KINGSWAY LONDON, WC2, England.

Please mention *The Journal of Laryngology* when replying to advertisements

The most popular Hearing Aids

Our first all transistor hearing aid was supplied in March 1954; since then, we believe that we have made more all-transistor instruments than any other manufacturer in Great Britain.

Our success has been due to:

- ★ Better performance and quality of reproduction than we have ever achieved before.*
- ★ A range of models which enable us to deal equally successfully with perceptive cases requiring Automatic Volume Control, and exceptionally severe cases of deafness for whom very large amplification and power output are needed.
- ★ Reliability coupled with negligible running costs.

* *National Institute for the Deaf Technical Report No. 15, March, 1955*

Our instruments are widely distributed throughout Great Britain and overseas. Prices in Great Britain and Eire, from 39 gns.; Valve Aids from 27 gns.

MULTITONE ELECTRIC COMPANY LIMITED

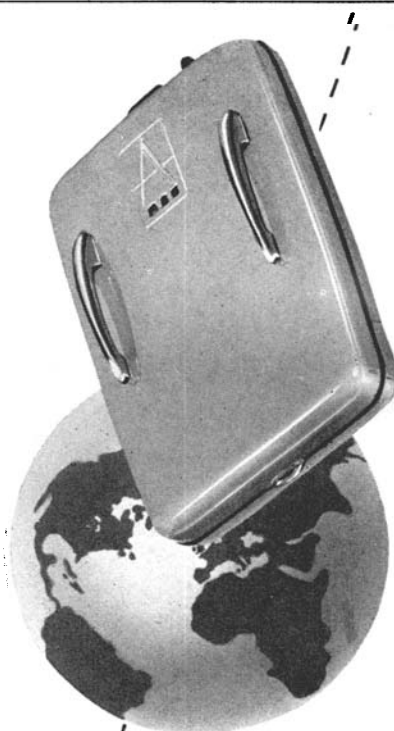
(Signatories to the National Institute for the Deaf Agreement)

25 DOVER STREET · LONDON · W1 (TELEPHONE: HYDE PARK 9977)

Please mention *The Journal of Laryngology* when replying to advertisements

*The finest
Hearing Aid
in the
World*

*is made in
England by Amplivox*



★ **VERY WIDE RANGE OF
FREQUENCY RESPONSE**

The advanced circuit design of the Amplivox "A" series ensures an exceptionally wide frequency response with a correspondingly high standard of clarity of sound reproduction unequalled in any other hearing aid manufactured either in Europe or in America

★ **VERY WIDE RANGE OF
ADJUSTMENTS FOR
INDIVIDUAL FITTING**

The Amplivox "A" series models are outstanding for their range of

adjustments, designed to meet all types of hearing loss. The fitting facilities of the instruments include selective amplification of high and low notes and automatic volume compression. A 3-volt battery can be used in place of the standard 1.5 volt battery to provide extra gain and amplification for the very deaf. In design and performance Amplivox Hearing Aids lead the world



47/48 New Bond Street, London, W.1 Hyde Park 9888-9
WORLD-WIDE DISTRIBUTION AND SERVICE

Please mention *The Journal of Laryngology* when replying to advertisements



A New Speech Audiometer

This instrument is made in accordance with the general specification laid down in a Paper by J. J. Knight and T. S. Littler: "The Technique of Speech Audiometry and a Simple Speech Audiometer with Masking Generator for Clinical Use" (*Journal of Laryngology and Otology*, Vol. LXVII, No. V, May 1953). It comprises:

- 1: A 3-Speed Record Player.
- 2: The main unit, as illustrated, containing a High Fidelity 10 watt Amplifier, Monitoring Meter, Attenuator covering $-2\frac{1}{2}$ db. to $+105$ db. with respect to threshold in $2\frac{1}{2}$ db. steps and a White Noise Generator with an output of 0 to 100 db. controlled in 10 db. steps which is fed to a single earphone.
- 3: A 12 inch loudspeaker in wooden cabinet of appropriate size with an attachment for positioning the patient's ear 12 inches from it.

Manufactured and Supplied by

MULTITONE ELECTRIC COMPANY LIMITED

(Signatories to the National Institute for the Deaf Agreement)

25 DOVER STREET · LONDON · W1 (TELEPHONE: HYDE PARK 9977)

Please mention *The Journal of Laryngology* when replying to advertisements



PETERS AUDIOMETERS

The SPD/2 Clinic Audiometer (illustrated) and the simpler SPD/3 Consulting Audiometer combine the advantages of both continuous and fixed frequency instruments. They each provide a continuous frequency range with continuous threshold compensation so that all hearing loss readings for air and bone conduction at any desired frequency are taken from the same zero reference level. In addition the continuous variability of the attenuator, makes it completely silent.

The Clinic Audiometer incorporates facilities for performing almost all known audiometric tests while the Consulting Audiometer fulfils normal clinical requirements.

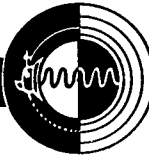
Speech audiometric accessories and a Peepshow for the testing of young children are available for both instruments. Please write for a descriptive brochure.

London Representatives:—Acousticon, 122 Wigmore St., W.1.

Representatives in almost all countries

ALFRED PETERS & SONS LTD

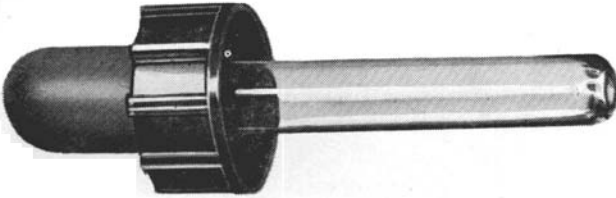
89 ARUNDEL ST.



SHEFFIELD 1.

Please mention *The Journal of Laryngology* when replying to advertisements

An easier way of removing EAR WAX



Hitherto, the removal of wax from the external auditory meatus has commonly necessitated two attendances by the patient—first for diagnosis and prescription of a suitable loosening agent—the second, two or three days later, for syringing. Now, by the use of Cerumol Ear Drops, wax can be removed, in the majority of cases in one visit. A few drops of Cerumol are instilled into the ear, and, while another patient is being seen to, the soft cerumen dissolves and the harder wax disimpacts. The resultant débris can then be cleared by gentle syringing. Only when the wax plug is abnormally hard, is it necessary for the administration of Cerumol to be prolonged and the patient told to return for syringing at a later date. In many cases, Cerumol can be instilled by patients in their own home and, as the wax has frequently been found to come out of its own accord, further visits are unnecessary. Cerumol is anti-bacterial, efficient, and harmless to the lining of the external auditory meatus or to the tympanic membrane. Accepted for use in a large number of hospitals and general practices, Cerumol is included in Category No. 4 of the M.O.H. classified list of Proprietary Preparations, and may therefore be prescribed on N.H.S. form E.C.10.

CERUMOL EAR DROPS

REGD TRADE MARK

Samples of Cerumol will gladly be sent to members of the Medical Profession, on application to the Distributors:

TAMPAX LIMITED

Medical Department, Belvue Rd., Northolt, Greenford, Middx. Tel: WAX 2244-7
A Product of the Laboratories for Applied Biology Ltd., London, N.16.

PACKS for Surgery Use: 10 c.c. vial—separate dropper included (Basic N.H.S. price 2/8d.) For Hospital Use: 2 oz. and 10 oz. bottles.

Please mention *The Journal of Laryngology* when replying to advertisements

**UNIVERSITY OF LONDON
BRITISH POSTGRADUATE MEDICAL FEDERATION**

The Institute of Laryngology and Otology

330/332 GRAY'S INN ROAD, LONDON, W.C.1

DATES OF COURSES, 1956

- | | |
|---|---|
| Full Comprehensive Course | 27th February to 11th December, 1956 and 27th August, 1956 to 7th June, 1957. |
| (a) Basic Sciences Class
(whole-time) | 27th February to 26th May, 1956 and 27th August to 24th November, 1956. |
| (b) Intensive Clinical
Lecture period
(whole-time) | 2nd January to 11th February, 1956 and 18th June to 28th July, 1956. |
| (c) Complete Clinical part
(whole-time) | 2nd January to 12th June, 1956 and 18th June to 11th December, 1956. |
| (d) Practical Revision Class
for Part II D.L.O.
Students (whole-time) | 30th May to 12th June, 1956 and 27th November to 11th December, 1956. |
|
Advanced Revision Class
for Final F.R.C.S.
(part-time) |
6th February to 21st April, 1956 and 14th August to 27th October, 1956. |
| Week-end Courses
for Consultants and Senior Students. | |
| The fundamentals of
Ultrasonics | 27th, 28th and 29th January, 1956. |
| Pathology | 24th and 25th February, 1956 and 28th, 29th and 30th September, 1956. |
| Endoscopy | 16th, 17th and 18th March, 1956. |
| Aural Surgery | 21st, 22nd and 23rd April, 1956 and 26th, 27th and 28th October, 1956. |

Please mention *The Journal of Laryngology* when replying to advertisements

AMPLIVOX MODEL 61 THE CLINICAL AUDIOMETER OF INTERNATIONAL REPUTE

"Messrs. Amplivox were among the first firms to produce an audiometer in this country, and their larger model is one of the best instruments of the kind now made in the world at a competitive price."—The LANCET, 23-12-50.

- Eleven exact test frequencies 125-12,000 c.p.s.
- Simplified hearing loss dial. The same set of figures is read for both bone and air conduction at all frequencies, and for speech.
- Bone conduction tests can be made from 125-4,000 c.p.s.
- Masking Tone calibrated in decibels, permitting accurate control of masking.
- Double Air receivers enable test tones to be switched instantly from ear to ear.
- Speech test circuit monitors speech level, permitting accurate measurement of hearing loss for speech.
- Loudness Balance Control establishes presence of recruitment in monaural deafness.
- Automatic voltage compensator.

Recruitment Test Set accessory establishes presence of recruitment by amplitude modulation, enabling each ear to be tested independently.

Speech Turntable, English made P.B. and Harvard Spondee Records available.

Full details are available from the manufacturers who will gladly arrange demonstrations if required.



The Basic Instrument of Modern Otology

ACCURATE • COMPLETE • SIMPLE TO OPERATE

AMPLIVOX LTD., 2 BENTINCK ST., LONDON, W.1 (Welbeck 2591)

Please mention *The Journal of Laryngology* when replying to advertisements

CONTENTS

	PAGE
THE SURGERY OF THE EAR IN THE MANAGEMENT OF INTRACRANIAL COMPLICATIONS OF CHRONIC SUPPURATIVE OTITIS MEDIA. Terence Cawthorne (London)	579
THE COMPARATIVE PATHOLOGY OF OTITIS MEDIA—EXPERIMENTAL AND HUMAN. I. Friedmann (London)	588
LOCAL EFFECT OF VARIOUS SUBSTANCES ON THE SENSE OF SMELL. Kaj Zilstorff-Pedersen (Copenhagen)	602
DIAGNOSIS OF ACOUSTIC NEUROMA. W. R. Denny (London)	608
RADIOGRAPHY AS AN AID TO DIFFERENTIAL DIAGNOSIS BETWEEN OTOSCLEROSIS AND CHRONIC ADHESIVE PROCESS. C. A. Hutchinson (Salisbury)	617
CLINICAL RECORDS—	
Plasmacytoma of Nasal Septum. H. M. Jay (Adelaide)	625
Large Hypo-Pharyngeal Polyp in an African. H. T. Laycock (Zomba, Nyasaland)	627
SOCIETIES' PROCEEDINGS—	
The Scottish Otolaryngological Society	631
GENERAL NOTES	635

For Advertisement space in this Journal apply to:
HEADLEY BROTHERS Ltd, 109 Kingsway London WC2

Please mention *The Journal of Laryngology* when replying to advertisements