

General Notes

THE TWJ FOUNDATION

The Trustees of the TWJ Foundation
invite applications for
A CLINICAL AND RESEARCH FELLOWSHIP IN OTOTOLOGY
FUNDED JOINTLY WITH THE UNIVERSITY OF TORONTO
and tenable in
THE DEPARTMENT OF OTOLARYNGOLOGY, THE UNIVERSITY OF TORONTO
for a period of six to twelve months during 1990

The holder will be a member of the Department of Otolaryngology of the University of Toronto under the direction of Professor Peter Alberti and will carry out clinical and research work with Professor Michael Hawkes in the Ear Pathology Research Laboratory and eventually prepare papers for publication.

Applicants must be Fellows of one of the Royal Colleges of Surgeons and a Senior Registrar in Otolaryngology in an appointment recognized for Higher Surgical Training.

Further details concerning applications should be obtained *now* from:

The Trustees of the TWJ Foundation,
Courtlands,
61 Kingswood Firs,
Grayshott, Hindhead,
Surrey GU26 6ER

The Closing Date for formal applications will be
SATURDAY, 23 SEPTEMBER, 1989.

16TH ANNUAL MEETING OF THE AMERICAN AUDITORY SOCIETY INC

NEW ORLEANS, 24 September, 1989

The 16th annual meeting of the American Auditory Society will be held in New Orleans, LA on Sunday, 24 September, 1989. The meeting is scheduled in conjunction with the annual meeting of the American Academy of Otolaryngology – Head and Neck Surgery.

For further information contact:

J. W. Hall, III, Ph.D.,
Department of Otolaryngology,
School of Medicine,
Vanderbilt University,
Nashville, TN 37232.

DEPARTMENT OF OTORHINOLARYNGOLOGY AND HEAD AND NECK SURGERY
OF K.E.M. HOSPITAL, BOMBAY

XIIIth TEMPORAL BONE MICROSURGERY WORKSHOP

From: 2 to 5 October, 1989

VIIIth NEUROTOLOGY WORKSHOP

From: 6 to 7 October, 1989

It includes demonstration of live surgery like Mastoidectomy, Myringoplasty, Tympanoplasty, Stapedectomy, Facial Nerve Decompression and Endolymphatic Sac Decompression. Cadaveric Temporal Bone Dissection—limited to 18 participants.

The highlights of Neurotology workshop. The workshop will deal in depth the practical approach to the vertigo patient including clinical diagnosis, Audiology, Radiology, Biochemistry, Electronystagmography, Evoked Response Audiometry and Therapy both Medical and Surgical.

Registration Fee: Temporal Bone Microsurgery Workshop } £75
Neurotology workshop }

For details please contact:

Dr M. V. Ingle
Hon Assoc Professor,
Department of ENT,
K.E.M. Hospital, Parel,
Bombay-400 012.
INDIA.

Chairman:
Dr S. B. Ogale,
Professor and Head
Department of ENT,
K.E.M. Hospital, Parel,
Bombay-400 012.
INDIA.

XV COURSE ON TEMPORAL BONE DISSECTION

2, 3, 4 April, 1990

BARCELONA, SPAIN

Dr Pedro Clarós and Professor J. P. Bebear (Portmann Foundation).

For further information:

Pedro Clarós, M.D., Ph.D.,
ENT Department,
San Juan de Dios Hospital,
Carretera de Esplugas s/n,
08034 Barcelona, Spain.

TEMPORAL BONE SURGICAL DISSECTION COURSE

OFFERED BY

THE DEPARTMENT OF OTOLARYNGOLOGY

THE UNIVERSITY OF MICHIGAN MEDICAL SCHOOL, ANN ARBOR, MICHIGAN

COURSE DIRECTOR: JOHN L. KEMINK, M.D.

1989:			16-20 October	13-17 November
1990:	2-6 April	14-18 May	15-19 October	12-16 November

Intensive one-week courses emphasize the surgical and anatomical approaches to the temporal bone, and are presented in a manner relevant for the otologic surgeon, utilizing lectures, videotapes, and dissection.

Mornings and afternoons are spent in the dissection laboratory, giving extensive drilling experience in temporal bone anatomy and surgical techniques. All instruments and high-speed handpieces will be provided.

Course fee is: Physicians \$1,000 Residents \$750

For further information write:

John L. Kemink, M.D.,
Box 0312 Taubman Medical Center,
1500 E. Medical Center Drive,
Ann Arbor,
Michigan 48109, U.S.A.
Tel: (313) 936-8006

XIV COURSE ON TEMPORAL BONE DISSECTION

6, 7, 8 November, 1989

BARCELONA, SPAIN

Dr Pedro Clarós and Professor J. P. Bebear (Portmann Foundation).

For further information:

Pedro Clarós, M.D., Ph.D.,
ENT Department,
San Juan de Dios Hospital,
Carretera de Esplugas s/n,
08034 Barcelona, Spain.

GLASGOW TEMPORAL BONE COURSES

33rd Course – 24, 25, 26 May, 1989

34th Course – 25, 26, 27 October, 1989

AT GLASGOW ROYAL INFIRMARY

Tutors: Mr Andrew Baxter, F.R.C.S., Mr George G. Browning, M.D., F.R.C.S.,
Mr Alastair M. Pettigrew, F.R.C.S.

The courses are primarily designed for otologists in training but they will be of interest to more experienced surgeons. Tutorials on otological techniques and results together with histopathology of the temporal bone will complement the main component of the course which is supervised dissection of the temporal bone.

The courses are approved for training in the U.K.

Further details from:

Mr Alastair M. Pettigrew, F.R.C.S.,
Stirling Royal Infirmary,
Stirling FK8 2AU,
United Kingdom.

Tel: 0786 73151 Ext. 78-401.

THE 26TH HEAD AND NECK COURSE

will be held at the

LIVERPOOL MEDICAL INSTITUTION

on Friday, Saturday and Sunday

19 to 21 January, 1990

This will be a basic course intended mainly for those in training.

The course Fee will be £230 including coffee, lunch and tea, but *not* including accommodation or evening meal.

The resident faculty are:

Professor A. G. D. Maran: Professor P. M. Stell.

Application forms and further information may be obtained from:

Professor P. M. Stell,
Department of Otorhinolaryngology,
University of Liverpool,
Royal Liverpool Hospital,
PO Box 147
Liverpool L69 3BX.

Instructions to Authors

Historical Articles. Articles of this type are generally encouraged, but it is obvious that they have to provide some new information or interpretation, whether it be about a well-known person or for example an instrument associated with him, but those from within a Hospital's own department who have made a hitherto less well-known contribution would be welcome.

Letters to the Editor. This feature is to be re-introduced to give those who wish to comment about a paper previously published within the Journal, an opportunity to express their views. Wherever possible, we shall ask the original author to add his further comment, thereby adding to the value of the contribution. Such letters should be sent as soon as possible after publication of each month's issue of the Journal in the hope of including them as soon as possible thereafter.

'Mini-papers, such as those which appear in the British Medical Journal, Lancet, or New England Journal of Medicine, will not be acceptable except on the rare occasion that they bring information of immediate interest to the reader.

Pathology. It is proposed to present on a monthly or bi-monthly basis, articles which are of pathological interest with particular emphasis on the way the diagnosis was achieved, the techniques involved, etc. It is hoped that clinicians will involve their pathologists in these reports, and all illustrations must be of first-class quality. Where a department, particularly those overseas, may not have such specialized facilities, it may be possible, if a block or several unstained sections are provided for our Adviser to produce or supplement the illustration submitted. Only contributions of particular pathological interest will be accepted.

Radiology. It is proposed to introduce on a monthly or bi-monthly basis, short reports on cases in which the radiology has been crucial in the making of the diagnosis or the management of a particular case. This spot is to encourage clinicians and radiologists to produce material of particular interest in the specialty and to encourage co-operation in this field. Only presentations with first-class illustrations can be accepted and these must emphasise a problem of unusual clinical interest.

Check List for Authors/Secretaries

1. Title page—Titles should be short with names of the authors, higher degrees only and the city/country. Details of the departments in which the authors work should be put lower down.
An address for correspondence should be supplied together with the author who should receive this and this will ultimately appear beneath the list of references. If the paper was presented at a meeting, the details of this must be given and will be inserted at the bottom of the first page of the printed script.
2. Abstract—No paper will be accepted without this and it adds considerably to the Editor's time to have to write and request this if the paper is accepted.
3. To follow the Instructions to Authors with the way in which the paper is set out. It is preferred that each section should start on a fresh page with double spacing and wide margins.
4. References must be in the Harvard system; to submit a paper using the Vancouver system is automatically to have it returned or rejected.
5. Two sets of illustrations must be included, one of half-plate size and the other with the width of 80 mm. Illustrations must be clearly labelled with the author's name on the reverse side and where appropriate with an arrow to give orientation.
6. Authors to check manuscript and references to see that these match up particularly for dates and spelling.
7. Titles of Journals must be given in full with the date, volume number and first and last pages.
8. Consent to be obtained from a patient if a photograph of their face is to be reproduced.
9. If the author to whom correspondence is to be directed changes his address, he should let the Editorial Office know as soon as possible.
10. Page proofs will normally be sent out three months in advance and must be returned as soon as possible.

Instructions to Authors	<i>Inside Front Cover</i>
Main Articles	
Carcinoma of the ear: Retrospective analysis of 61 patients: <i>D. G. Golding-Wood, R. E. Quiney and A. D. Cheesman</i>	653
Attitudes to tympanometry: <i>P. J. Stoney and J. H. Rogers</i>	657
Changing incidence of sinus infection in children: <i>L. C. Knight and T. H. J. Lesser</i>	659
Sublabial rhinotomy with septal transfixion as an approach to the nasal fossa, paranasal sinuses and nasopharynx: <i>B. J. G. Bingham and M. V. Griffiths</i>	661
Prevention of post-operative intra-nasal adhesions (a new material): <i>P. N. Eliopoulos and C. Philippakis</i>	664
Ophthalmic considerations in fronto-ethmoidal mucocoeles: <i>V. J. Lund and M. E. Rolfe</i>	667
A modified incision for the trans-septal trans-sphenoidal approach to the pituitary: <i>M. E. Baraka</i>	670
Two-stage temporalis flap reconstruction for facial paralysis: <i>B. D. Buchholtz, R. A. Mickel, J. K. Bredenkamp and R. W. Hutcherson</i>	672
Adenoid cystic carcinoma of the salivary glands: Clinicopathological survey of 51 patients: <i>V. N. Koka, R. M. Tiwari, I. Van Der Waal, G. B. Snow, J. Nauta, A. B. M. F. Karim and A. H. Tierie</i>	675
Cough as the sole manifestation of airway hyperreactivity: <i>A. Frans and J. Van Den Eeckhaut</i>	680
Clinical Records	
Osteoma of the ear canal presenting with headache: <i>P. Shenoy, K. O. Paulose, S. A. Khalifa and R. Sharma</i>	683
Bilateral facial nerve palsy following secretory otitis media: <i>D. J. Premachandra and G. Radcliffe</i>	685
Fibrosarcoma of the ethmoid <i>M. C. F. Smith and J. V. Soames</i>	686
Second primary tumour following retinoblastoma: <i>D. C. Berridge, A. Hitchcock, P. J. Bradley and L. Kapila</i>	690
Carcinoma of the laryngeal saccule: A biopsy technique to make a difficult diagnosis: <i>S. Habashi, A. F. Padel and J. W. R. Capper</i>	692
Carcinoma of the pharyngeal pouch: <i>D. J. Stevens</i>	695
Pharyngeal paralysis due to botulinum toxin injection: <i>C. E. Koay and T. Alun-Jones</i>	698
Atypical thyroglossal duct cyst: <i>V. L. Cumberworth and P. J. Bradley</i>	700
Intravagal parathyroid adenoma: <i>T. Takimoto, Y. Okabe, M. Ito and R. Umeda</i>	704
Agenesis of the cervical internal carotid artery: <i>T. Nishimura, T. Takimoto, M. Kamide, S. Ishikawa and R. Umeda</i>	707
Spontaneous external carotid artery occlusion: <i>J. A. Dixon</i>	710
Management of achalasia and laryngo-tracheal compression: <i>G. D. Barr and I. MacDonald</i>	713
Abstract Selection	715
Book Reviews	723
General Notes	727