

Letter to the Editors

The author shows that the temporary loss of voice, following on such operations, is due to a lack of power to direct the breath to the head sinuses, and that this can be remedied by practice.

Mr White analyses the whole process of voice production in speaking and singing, and endeavours to show how the conception of the function of the cords and sinuses, which he adopts, provides the true interpretation. Hitherto the production of sound has been ascribed to the vibration of the cords, modified and re-enforced by the various sinus resonators. Mr White regards the sinuses as the seat of sound production, but it is still not quite clear from his account of the matter that the sound is produced in the absence of any vibrating mechanism like the cords. The vibrations according to him are caused by the tortuous passages and sinuses through which the air travels.

Whatever may be the final result of investigation, it must be admitted that the author has produced a mass of facts and suggestions which are well worthy of the most careful consideration of all teachers of voice production.

M. L. S.

LETTER TO THE EDITORS.

TO THE EDITORS,

The Journal of Laryngology and Otology.

SIRS,—Mr T. A. MacGibbon, in the *Journal* of October 1922, says that if he could be sure of obtaining the same results with the immediate closure of the mastoid wound, as with the older method of completing the Schwartze operation, he would willingly adopt it.

He need not fear to do so. It is certainly one of the greatest advances in aural surgery; in fact, it makes the operation almost uninteresting. The use of B.I.P.P. and the blood-clot will not give the excellent result if infected cells are left, and failure may result if too much B.I.P.P. is used.

Let Mr MacGibbon follow out accurately Mr Tilley's technique and apply B.I.P.P. to his sutures and he will not have even stitch abscesses. Practically all his after-treatment will consist in putting on a clean bandage for the sake of appearances, and in taking out the sutures in a week or so. He will be impressed with the remarkable way in which the middle ear clears up, while the patient is saved all the torment of the after-dressing.

H. J. GRAY.

PERTH, WESTERN AUSTRALIA.