LETTER TO THE EDITORS

HYPERTROPHY OF PHARYNGEAL LYMPHOID TISSUE.

THE EDITORS,

The Journal of Laryngology and Otology.

SIRS, — Among my out-patients, this morning, I saw a case of exaggerated lateral hypertrophic pharyngitis in a boy of 8 years, who had had his tonsils partially removed (?) three times. The masses, as described in "Wright & Smith," involved the posterior surfaces of the posterior pillars and were as large as an ordinary man's hypo-thenar eminence. These masses extended from the pharyngo-epiglottic folds below, upwards to the fossæ of Rosenmüller. Small portions of tonsils and adenoids remained. The lingual tonsil was only slightly hypertrophied. During gagging the masses touched one another.

I have seen other cases where the hypertrophied lymphoid tissue formed a mat all round the oropharynx.

It is a big undertaking to cauterise so large a mass, and curettage or morcellement is, I think, wrong. I can only suggest to the parents careful removal of the tonsillar and adenoid remains, and then general treatment including a digestible form of iron, iodine, and small doses of thyreoid extract. This condition is common and appears to me to be associated with thyreoid dyscrasia. Thyreoid disease is exceedingly common in the district. It is not associated with absence of sunlight in New Zealand, because we have in the surrounding districts here about the same average sunshine hours as in Southern Italy!

I have been in the habit of ordering a modified form of climatic and open-air treatment in these cases.

I shall be glad to have the experience of laryngologists on this matter.—Yours faithfully, T. A. MACGIBBON, M.D.

CHRISTCHURCH, N.Z., 20th April 1926.

GENERAL NOTES

ROYAL SOCIETY OF MEDICINE, 1 Wimpole Street, London, W. 1.

Sections of Laryngology and Otology.—The Session 1926-27 will open on Friday, 5th November. The Section of Laryngology will meet on Friday, 5th November, at 5 P.M., and the Section of Otology on Saturday, 6th November, at 10.30 A.M.

THE SEMON LECTURE, 1926.

Dr A. Brown Kelly, M.D., D.Sc. (Glasg.), has been invited by the Semon Lecture Board to deliver the Semon Lecture, University of London.

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