

THE  
 JOURNAL OF LARYNGOLOGY,  
 RHINOLOGY, AND OTOTOLOGY.

---

*Original Articles are accepted by the Editors of this Journal on the condition that they have not previously been published elsewhere.*

*Twenty-five reprints are allowed each author. If more are required it is requested that this be stated when the article is first forwarded to this Journal. Such extra reprints will be charged to the author.*

*Editorial Communications are to be addressed to "Editors of JOURNAL OF LARYNGOLOGY, care of Messrs. Adlard and Son, Bartholomew Close, E.C."*

---

EDITORIAL.

**INTRA-NASAL OPERATIONS—THE PREPARATION AND  
 AFTER-TREATMENT.**

THE question of the preparation and after-treatment in cases of intra-nasal operation is one to which no experienced rhinologist will refuse his earnest attention. To many such it must be astounding to read the recommendations of energetic surgical treatment in the interior of this organ, found in various articles, and notably those issuing on the other side of the Atlantic. There may be climatic conditions or other circumstances leading to immunity from post-operative embarrassments on which the practitioners in these islands cannot depend. None will deny that the noses with which we have here to deal, decline in many cases to recover from operative interference in the kindly way to which many of our Trans-Atlantic colleagues seem to be accustomed. The comparative paucity of reference to cases of operation on the nasal septum, for instance, in the *Proceedings of the London Laryngological Society*, is extremely significant when we realise the extent of the sources from which the members of that Society draw their clinical material. Looking upon the Society as a human institution, we may ascribe the bringing forward of cases to several different factors, namely, the great interest attached to the occurrence of a rare affection, the desire for information on account of the obscurity of its nature, or again, it must be admitted, the very legitimate desire to exhibit a case in which the member is gratified with the success of the treatment employed.

Had operations on the nasal septum been with any great frequency as brilliant as could have been wished, we have no doubt that the operators would have brought them forward more often than has occurred. Many, we have no doubt, have been passing through the same mental condition as Sir Felix Semon, namely, that of dissatisfaction with many of the results obtained in his own hands and in those of other operators whose discretion and skill were also above question. Like him, many others, we are sure, have been hoping, by improvements in technique, to find their results as uniformly brilliant as printed records would lead them to think they ought to expect. Some, no doubt, after a run of consecutive cases in which the results have been all that could be desired, have met some of the dismal surprises of intra-nasal surgery in the shape of cases in which toxic or other serious complications have ensued to the utmost discomfort and disappointment of the operator. Sir Felix Semon tentatively referred the matter in private to various of his *confrères*, and was able to assure himself at once that the difficulties and anxieties which had fallen to his share had proved a source of almost constant anxiety to those of whom he had made enquiries. The views placed before the German Otological Society<sup>1</sup> by Dr. Krebs, show that his mind has been working in the same direction, as our readers will see on a perusal of the interesting paper we present for them in an English guise. The divergence of the opinions of various observers and operators will not surprise the experienced student, and while he will as usual realise that *in medio tutissimus ibis* he will highly appreciate the importance of the ventilation of the subject, for which we are indebted to Dr. Krebs and Sir Felix Semon.

### RETROSPECT OF LARYNGOLOGY, 1903.

By JOHN MACINTYRE, M.B., C.M., F.R.S.Ed.

DURING the past twelve months we have had no startling developments either in the study of acute or chronic affections of the larynx, but, as we have said in the retrospect of past years, there is every reason to be pleased with the steady progress being made in laryngology, whether studied from the clinical, pathological, or therapeutic standpoints.

<sup>1</sup> *Vide* page 15 of this JOURNAL.