

**ON THROAT DEAFNESS,
AND THE PATHOLOGICAL
CONNEXIONS OF THE
THROAT, NOSE, AND EAR**

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JAMES YEARSLEY

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NINTH EDITION.

ON
THROAT DEAFNESS,
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OF THE
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BY
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LONDON:
JOHN CHURCHILL, NEW BURLINGTON STREET.
1861.

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M'GOWAN AND DANKS, GREAT WINDMILL STREET, HAYMARKET.

PREFACE.

THE following pages are reprinted from my larger work entitled "Deafness Practically Illustrated," which has now reached its fifth Edition. Nineteen years have passed since I first drew the attention of the Profession and the Public to the intimate connexion between the throat and ear in the following words:—"Almost all diseases of the ear associated with deafness originate in the morbid condition of the mucous membrane of the throat, nose, and ear, which becomes affected from a variety of causes, among which cold, the eruptive fevers or exanthemata (especially scarlatina), and stomach derangement, stand pre-eminent; and according as the disease terminates in simple thickening of the membrane, in adhesions, in disorganisation of the whole mucous lining, in partial or total loss of the membrana tympani, in

loss of the ossicula, or of the inner membrane of the fenestræ, so is the deafness more or less intense and confirmed."—*Vide* 'Medical Gazette,' 1841.

Notwithstanding this plain, unvarnished explanation of the cause of deafness, confirmed by experience in many thousands of cases, propounded in medical periodicals and in my published works for nearly twenty years, and never even attempted to be controverted, we still hear of ear-drops, lubricating fluids, and other applications to the outer passages of the ear for the cure of deafness. Whilst it is confidently believed that such unscientific treatment will be made apparent by a careful perusal of the following pages, it is gratifying to be able to state that the more philosophic and rational treatment recommended is as free from pain and risk as it is ordinarily successful.

THE AUTHOR.

London, 15 Saville Row, W.,
Jan. 1861.

ON THROAT DEAFNESS,

ETC.

ON DEAFNESS FROM MORBID CON- DITIONS OF THE MUCOUS MEMBRANE OF THE THROAT, NOSE, AND EAR.

To the attentive observer of health and disease, the mucous membranes must always rank among the most interesting and important of the tissues which compose the human fabric. In an anatomical point of view, their distribution betrays evidence of the most exquisite design, the greatest possible diversity of figure and arrangement being resorted to for the purpose of affording a prodigious extent of mucous surface. So perfectly is this object effected, that the mind even of an anatomist would be absorbed with wonder, could it, at a glance, behold spread out on a plane surface, the space these membranes really occupy, and the immense extent of their ramifications through cells, tubes, canals, reduplications, and

convolutions, in an almost infinite variety of arrangement and form. They compose, it may be said, the groundwork on which most of the vital functions of secretion, excretion, and absorption are effected; and, besides this, are intimately concerned in the perfection of the senses of sight, hearing, smell, taste, and—ininitely more than has been yet imagined—the faculty of speech.

My subject confines me to the consideration of one division of the great mucous track, ramifying throughout the respiratory and intestinal organs. Commencing at the mouth, at the junction of the skin with the red tissue of the lips, the mucous membrane passes inwards to line the mouth, and enters into all the mucous and salival glands, giving off delicate prolongations for lining the different nasal cavities, the cells, and sinuses in the upper jaw, os frontis, and the other bones of the cranium and face, which are subservient to the senses of hearing and smell. In the pharynx it becomes continuous with the mucous lining of the Eustachian tubes, and through them enters the tympanum as its investing membrane, covering the small membranes which close in the inner ear, and also the external membrane or drum; finally, this part of the membrane spreads itself out on the surfaces of the mastoid cells behind the organ of hearing.

Passing downwards from the throat, its track

admits of two important divisions: the one, entering at the glottis, runs down the trachea and bronchial tubes, dividing and subdividing to an infinite extent, to form those innumerable cells in which the vital properties of the air become imparted to the blood, as it flows through the lungs; the other division, or the intestinal mucous membrane, passes down the gullet to the stomach, contributing greatly to the formation of that organ, and becomes the seat of the secretion of the gastric juice, the bile, pancreatic fluid, and the multitude of minor glands with which the intestinal tube is everywhere studded.

Whether in health or in their diseased states, the sympathies of different divisions of the mucous membranes with each other, and of the mucous tissues with structures of an opposite nature, are some of the most constant and remarkable occurring in the animal economy. No one spot of mucous membrane can be affected without a corresponding manifestation in another, and, it may be, some remote organ. The most prominent instance of sympathy between other organs and mucous membranes is that existing between these and the skin. Impressions of cold on the cutaneous surface commonly produce their ill effects on some part of the mucous system. In most persons catarrh of the bronchial membrane is the result, while in others the membrane of the stomach,