

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

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On throat deafness and the pathological connexions of the throat, nose, and ear by James Yearsley

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BY

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PREFACE.

THE following pages are reprinted from my larger work entitled "Deafness Practically Illustrated," which has now reached its fourth edition. Twelve 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 a 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 partial or total loss of the membrana tympani, in disorganisation of the whole mucous lining, in loss of the ossicula or of the inner membrane of the fenestræ, so is the deafness more or less intense and confirmed."

Notwithstanding this plain, unvarnished explanation of the cause of deafness, confirmed by experience in many thousands of cases, which has been propounded in medical periodicals and in my published works for upwards of twelve years, and never even attempted to be controverted, we still hear of ear-drops and lubricating fluids, such as glycerine, almond oil, &c., to be applied to the outer passages of the ear for the cure of deafness! Such monstrous absurdities and unblushing quackery, it is confidently believed will be effectually exposed by a careful perusal of the following pages.

THE AUTHOR.

London, 15, Savile-Row,

June, 1852.

ON THE PATHOLOGICAL CONNEXIONS OF THE THROAT AND EAR.

DEAFNESS, arising from a disordered condition of the throat, though of such frequent occurrence, had attracted so little attention prior to the publication of my first contribution to Aural Surgery,* that many persons, both in and out of the profession, were inclined to ask, "What relation there could possibly be between the throat and the ear?" and "How could a diseased state of the one organ affect the functions of the other?" Though this connexion may not, at the first glance, be evident, it is, in reality, so intimate, constant, and reciprocal, that no observant practitioner could possibly devote himself to the study of the one without being drawn to the examination of the other. In my own practice, I feel bound to declare, that in the diagnosis and treatment of affections of the throat and ear, they have shed a mutual light, the one on the other, conducing in an especial manner to their more successful management.

The connexion between the throat and the ear, in their morbid conditions, admits of description under three natural divisions:—

* "Deafness successfully treated through the Passages leading from the Throat to the Ear."

1. The mechanical relation between the two parts, arising out of the necessity which exists in perfect hearing, that the free circulation of air through the Eustachian tube, and in the tympanum, be maintained.

2. The connexion between the throat and ear caused by contiguity and continuity of structure through the medium of the mucous membrane.

3. The sympathetic connexion between the nerves of the throat and those of the auditory organ.

L. THE MECHANICAL RELATION BETWEEN THE TWO PARTS, ARISING OUT OF THE NECESSITY WHICH EXISTS IN PERFECT HEARING, THAT THE FREE CIRCULATION OF AIR THROUGH THE EUSTACHIAN TUBE, AND IN THE TYMPANUM, BE MAINTAINED.

1. The most obvious relation between the throat and ear is that dependent on mechanical causes; yet it is a singular fact, and shows how little of scientific attention has been given to aural diseases, that the mode of removal of the most simple kind of obstruction of the Eustachian tube—namely, by Eustachian catheterism—is a remedial agent of comparatively recent introduction.

From whatever cause arising, an obstructed communication between the throat and ear is inevitably productive of deafness. When deafness of this kind exists, it can only be completely cured by the de-obstruction of the Eustachian canal. The cases laid down as curable by the operation of puncturing the membrana tympani, without interference with the tube,

are extremely rare; that is to say, cases in which complete obliteration of the passage exists. Even under this rare contingency, the cure is often partial or temporary. Deafness ensues under all circumstances of obstruction or occlusion, simply because when the tube is stopped, the atmospheric pressure is withdrawn from the inner surface of the membrane. When the internal atmospheric pressure is present within the cavity of the tympanum, which it is in the healthy condition, on account of the open state of the Eustachian canal, it of course exactly serves to counterbalance the pressure on the external surface of the drum, leaving the membrane to be adjusted in the proper degree of tension for the purposes of hearing, through the medium of the small muscles of the tympanum and the ossicula. When the internal pressure is withdrawn by occlusion of the Eustachian tube, the external atmospheric pressure alone remains, which is sufficient to force the membrane of the drum inwards, and, by rendering it permanently tense, to put a stop to the action of the tympanic muscles, and to destroy the vibratile properties of the membrane. It is well known that a certain degree of relaxation of the membrane is necessary to ensure its vibration by the action of sound.

The communication between the throat and ear is cut off in a variety of ways. It is by no means uncommon in simple catarrh to have the tumid state of the mucous membrane of the nose and throat which attends a cold, extend into the Eustachian canal so as partially or entirely to obstruct it. In some cases, this engorged state of the mucous membrane remains after all other signs of cold have disappeared, and keeps up a permanent obstruction of hearing. Another very frequent