July 1958

Vol. LXXII No. 7

The Journal of Laryngology and Otology

EDITED BY
WALTER HOWARTH

ASSISTANT EDITOR G. H BATEMAN

Contents

Tr	THE AETIOLOGY, DIAGNOSIS AND SURGICAL TREATMENT OF PHARYNGEAL DIVERTICULA	F. Boyes Korkis
Ti	HE AETIOLOGY, DIAGNOSIS AND SURGICAL TREATMENT OF PHARYNGEAL DIVERTICULA.	M. Spencer Harrison
Ri	ECENT ADVANCES IN TYMPANOPLASTIC SURGERY .	F. McGuckin
Gr	LANT-CELL EPULIS	HENNING SØRENSEN ✓
	AIOR SURGERY OF THE LARYNX UNDER INDUCED HYPOTHERMIA	R. W. Bailie, A. K. Boyle and A. Maciejewski A. Y. Awny,
		E. D. El-Samma, and A. A. Soliman
Cı	LINICAL RECORDS—	
	. CHOLESTEATOMA OF THE MAXILLARY ANTRUM .	C. PETER MILLS and E. McK. Sycamore
	AN UNUSUAL CASE OF UNILATERAL NASAL POLYPI ,	J. D. K. DAWES

Societies' Proceedings-

ROYAL SOCIETY OF MEDICINE—SECTION OF LARYNGOLOGY

Commercial Norma

London

Headley Brothers Ltd

109 Kingsway WC2

Annual Subscription £3/3/0 net, U.S.A. \$10

Monthly, 7/6 net post free

The Journal of Laryngology and Otology

(Founded in 1887 by Morell Mackenzie and Norris Wolfenden)

EDITED BY WALTER HOWARTH

ASSISTANT EDITOR G. H. BATEMAN

1. Original Articles are accepted on the condition that they have not been published elsewhere.

2. Manuscripts should be typewritten, on one side only of the paper, and well spaced. Captions to illustrations should be typed on a separate sheet and

sent at the same time as original photographs etc.

The Harvard system of recording references should be used, e.g. Green, C., and Brown, D. (1951) J. Laryng., 65, 33. Abbreviations of Journals should follow the style recommended in World Medical Periodicals, published by World Health Organization 1952.

It is most important that authors should verify personally the accuracy of

every reference before submitting a paper for publication.

3. Galley proofs and engraver's proofs of illustrations are sent to the author. Corrections, which should be kept to a minimum, must be clearly marked, and no extra matter added. Proofs should be returned within 5 days.

4. Illustration blocks are provided free up to the limit of £10 per article; beyond this authors are expected to pay half the cost. Goloured illustrations will

be charged in full to authors.

Blocks will normally be held by the Printers for three years after which they will be destroyed. Any author who has borne a part of the cost of his blocks is entitled to have these returned to him, but a request for this must be sent within three years of the appearance of the article, to HEADLEY BROTHERS LTD., 109 Kingsway London, WC2.

5. Orders for reprints should be sent when returning galley proofs, and for

this purpose special forms are supplied.

6. Authors of original communications on Oto-Laryngology in other journals are invited to send a copy, or two reprints, to the Journal of Laryngology.

If they are willing, at the same time, to submit their own abstract (in English, French, Italian, or German) it will be welcomed.

7. Editorial communications may be addressed to The Editor, Journal of Laryngology, c/o Headley Brothers Ltd., 109 Kingsway London, WCz.

8. The annual subscription is three guineas sterling (U.S.A. \$10) post free, and is payable in advance.

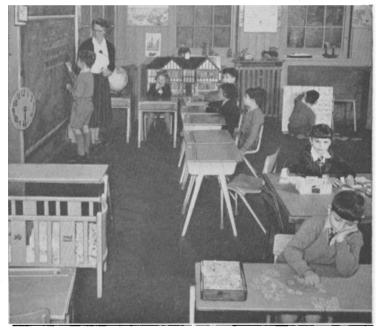
9. Single copies will be on sale at 7s. 6d. each; copies of parts up to Vol. LXIII may be purchased at 4s. each.

10. All subscriptions, advertising and business communications should be sent to the publishers, Headley Brothers Ltd., 109 Kingsway London, WC2.

United States of America
Orders for this Journal may be sent through local bookseller, or to
STECHERT-HAPNER, INC., 31-33 East 10th Street, New York, or direct to the publishers, Headley Brothers Ltd., 109 Kingsway London, WCz, England.

In schools for the DEAF—multitone Telesonic INDUCTION LOOP SYSTEM brings new advantages

- 1 Can be installed in adjoining classrooms without risk of 'spill over'.
- 2 Combines good hearing with complete freedom of movement. Unaffected by distance between pupil and teacher.
- 3 Clear speech at high amplification.
- 4 Any number of pupils may use the same installation.
- 5 The child can use the instrument as a normal hearing aid outside school.



The Kindergarten Class at the London Residential School for Jewish Deaf Children where all classrooms have been installed with the Multitone Telesonic Induction Loop System

Write for further details to:

multitone

ELECTRIC COMPANY LTD., 12-20 UNDERWOOD STREET, LONDON, N.I. CRC M23

HALLPIKE-BLACKMORE MONOCULAR ||EAR MICROSCOPE*||



USES

DIAGNOSIS

The excellent optical performance of the Hallpike Ear Microscope gives the user greatly increased confidence in the diagnosis of abnormal conditions; and many disorders may be recognized at an earlier stage than has hitherto been possible with "headlamp and speculum" techniques. Thus slight pulsation of swellings and vascular tumours—of high diagnostic significance and almost impossible to detect by conventional methods—can readily be detected under this microscope.

Use of the Siegle attachment permits observation of small bubbles present in fluid collections within the tympanum; it is also invaluable for demonstrating minute perforations. Where defects of the tympanic membrane are present, the middle-ear cavity can be scrutinized minutely; the detailed structure of the stapes, stapedius tendon, round window and Eustachian orifice—not normally visible by ordinary methods of examination—are seen with quite remarkable clarity when the Ear Microscope is used.

TREATMENT

Manipulative procedures may be undertaken with greater confidence and precision if the Ear Microscope and its special instruments are used.

The curettes enable adherent wax and debris to be removed with the greatest precision from the walls of the deep meatus or from the tympanic membrane itself. Cholesteatomatous masses or neoplasms may be examined critically and biopsy specimens obtained by means of the curettes. These may also be used as delicate probes for palpation of the incus and head of the stapes in certain cases of otosclerosis with retraction and atrophy of the tympanic membrane; in this way unmistakable evidence may be obtained of bony fixation of the footplate. Or again, it is sometimes possible to identify by palpation defects of the bony tympanic ring or meatal wall which may underlie granulations.

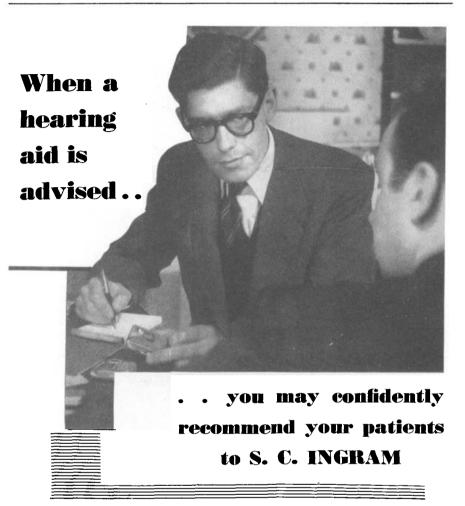
Myringotomy or removal of foreign bodies can be undertaken with surprisingly high precision because the optics of the Ear Microscope and the specially angled myringotome blade eliminate all shadows so that the surgeon can see clearly where and what he is cutting. The outfit is invaluable also for post-operative examinations and treatment of mastoid cavities. Granulations can be cauterized and exposed areas of dura mater carefully palpated.

*J. Laryng. (1953) 67, 108.

39 WIGMORE STREET LONDON W.1



5241 WHITBY AVENUE PHILADELPHIA 43, Pa, U.S.A.



- ★ They can try the different makes of hearing aids
- ★ They get impartial advice on all makes of hearing aids
- Their personal needs are given individual and continued attention
- ★ A full report on each fitting recommended is sent to the patient's ear specialist
- They can compare at one consultation the different makes one with another

S. C. INGRAM Independent Hearing Aid Consultant

On the approved List of the National Institute for the Deaf

2 SHEPHERD STREET, SHEPHERD MARKET, LONDON, W.I Hyde Park 9042

EAR WAX



Removed this easy way



The removal of wax from the external auditory meatus has, in the past, normally entailed attendance by the patient for diagnosis and for the prescription of a suitable loosening agent, and a second attendance a few days later for syringing.

Now, by the use of Cerumol Ear Drops, wax can be removed in most cases at one visit. A few drops of Cerumol can be instilled into the ear and, while another patient is being attended to, the soft cerumen dissolves and the harder wax disimpacts. The wax can then be removed by gentle



syringing or with cotton wool. The wax may even be found to run out of the ear on its own accord, in which case patients themselves may instil Cerumol at home, obviating further attendances. Cerumol is anti-bacterial, non-irritating and harmless to the lining of the external auditory meatus or the tympanic membrane.

Cerumol is included in Category No. 4 of the M.O.H. classified list and may be prescribed on N.H.S. Form E.C.10.





EAR DROPS

for the easier removal of wax



PACKS For Surgery Use: 10 c.c. vial — separate dropper included (Basic N.H.S. price 2/8) for Hospital Use: 2 oz, and 10 oz. bottles.

If you wish to test for yourself and have not received recently a 10. c.c. vial please write or telephone direct to:

LABORATORIES FOR APPLIED BIOLOGY LTD.,
91, AMHURST PARK, LONDON, N.16 Tel.: STA 2252

An outstanding accomplishment in hearing aid design

Amplivox



FACILITIES

Individual fitting related to the Audiogram by means of selective compensation. Tone control giving low frequency attenuation combined with an overall response extending to 4000 c/s provides excellent speech discrimination in cases of perceptive deafness.

SPECIFICATION

4 stage transistor circuit. Stable operation from 0° to 40°C.

Miniature earphone with extended response. Magnetic microphone. Telephone inductor. Mercury cell battery—life 100 hours. Size $2\frac{1}{8}'' \times 1\frac{1}{16}'' \times \frac{15}{32}''$ Weight 1 oz.

Mirror gold finish.

Two-stage adjustable automatic volume compression.

AMPLIVOX LTD . LONDON . ENGLAND 47/48 New Bond Street, London, W.1. Hyde Park 9888 WORLD-WIDE DISTRIBUTION AND SERVICE

CONTENTS

m A D D D D D D D D D D D D D D D D D D	PAGE
The Aetiology, Diagnosis and Surgical Treatment of Pharyngeal Diverticula. F. Boyes Korkis (London)	509
THE AETIOLOGY, DIAGNOSIS AND SURGICAL TREATMENT OF PHARYNGEAL DIVERTICULA. M. Spencer Harrison (Lincoln).	523
RECENT ADVANCES IN TYMPANOPLASTIC SURGERY. F. McGuckin (Newcastle-on-Tyne)	535
GIANT-CELL EPULIS. Henning Sørensen (Aarhus, Denmark)	546
Major Surgery of the Larynx under Induced Hypothermia. R. W. Bailie, A. K. Boyle and A. Maciejewski (Glasgow).	558
CLINICO PATHOLOGICAL INVESTIGATIONS ON ALLERGIC RHINITIS. A. Y. Awny, E. D. El-Samma, and A. A. Soliman (Cairo)	571
CLINICAL RECORDS—	
Cholesteatoma of the Maxillary Antrum. C. Peter Mills and E. McK. Sycamore (London)	580
An Unusual Case of Unilateral Nasal Polypi. J. D. K. Dawes (Newcastle)	584
Societies' Proceedings—	
Royal Society of Medicine—Section of Laryngology	5 ⁸ 7
GENERAL NOTES	500

For Advertisement space in this Journal apply to:
HEADLEY BROTHERS Ltd, 109 Kingsway London WC2