March
1997

The Journal of
Laryngology & Otology

Founded in 1847
by Murrell Maclean & Norwich Wartenber

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Vol
111
No 3

features:

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INSTRUCTIONS FOR AUTHORS

1. Original articles which have not been published elsewhere are invited and should be sent to the Editor. They are considered for publication on the understanding that they are contributed to this Journal solely. Reproduction elsewhere in whole or in part, is not permitted without the previous written consent of the Author and Editor and the customary acknowledgement must be made. Normally an original manuscript should not exceed 7500 words. Lengths may be considered as supplements, at the expense of the author or sponsor as Supplem[ying authorities.

2. Manuscripts should be typed in duplicate on one side of the paper only (A4 297 x 210 mm) and double spaced, with wide margins. Begin each component on a new page in the following sequence: title page, abstract, text, acknowledgements, references, tables and legends.

3. Title page—Titles should be short with no abbreviations. Ditis of the authors, higher rank named first should be put lower down. An address for correspondence should be supplied together with the author who should receive this; this will ultimately appear beneath the list of references. Any change of address should be notified. If the paper was presented at a meeting, the details of this must be given and will be inserted at the bottom of the first page of printed text.

4. (a) Abstract—This should contain not more than 150 words and include a statement of the problem, the method of study, results and conclusions: a summary of the most important information should be included in the main manuscript. No paper will be accepted without an abstract.

5. (b) Key Words—Only those appearing as Medical Subject Headings (MeSH) in the supplement to the Index Medicus may be used; where no appropriate word(s) are listed a second known person or for example an instrument associated with him, but those from within a Hospital’s own department who have made a hitherto less well-known contribution would be welcome.

6. Consent to be obtained from a patient if a photograph of their face is to be reproduced.

7. Photographs should be inserted in the text at the appropriate place and should be of good quality. Special efforts to improve definition should be made in black and white negatives, and the authors should consider the necessity for original photographs being returned to the editor. Photographs of graphs and charts should not be used for reproduction.

8. Manufacturer’s names of drugs or other lines should be used. One reference can be made to the brand name if it is felt to be important to the study.

9. Financial disclosures—In the submission letter to the Editor, the authors must list all affiliations with or financial involvement in, organizations or entities with a direct financial interest in the subject matter or material of the research discussed in the manuscript.

10. Declaration. Each manuscript must be accompanied by a letter of declaration to be signed by each author to confirm that they have seen, read and approve the contribution bearing their name.

11. Rejections—All manuscripts which are rejected will no longer be returned to the authors. Those submitting papers should, therefore, ensure that they retain at least one copy and the reference numbers, if any, of the illustrations. The only exception to this will be those manuscripts with colour illustrations which will be returned automatically by Surface Mail.

12. Facsimile—(FAX) All manuscripts which are rejected will no longer be returned to the authors. Those submitting papers should, therefore, ensure that they retain at least one copy and the reference numbers, if any, of the illustrations. The only exception to this will be those manuscripts with colour illustrations which will be returned automatically by Surface Mail.

13. Page proofs are sent to authors for corrections, which should be kept to a minimum; they must be clearly marked, and no extra matter added. Proofs should be returned within 5 days.

14. Orders for reprints must be sent when returning page proofs, and for this purpose special forms are supplied.

15. Editorial communications may be addressed to The Editor, Journal of Laryngology and Otology, c/o Headley Brothers Ltd., The Invicta Press, Ashford, Kent TN24 8HJ, or sent by FAX (01435 451874).

16. The annual subscription is £110.00. Institutions and Libraries £85.00. Individuals £65.00, £45.00 Registrars, Residents and Interns. (Those in training must send a certificate from The Head of the Department The subscription price to be quoted); those who qualify must supply their home address for mailing direct. Claims to be made for missing issues within 6 months of each publication date.

17. Single copies of current or back numbers (when available) will be on sale at £12.00 each (including postage).

18. SUPPLEMENTS published at irregular intervals with contributions of particular pathologists will be accepted.

19. All subscriptions, advertising and business communications should be sent to the publishers, or subscription agents.

Instructions for Occasional Articles

Review Articles. Articles of this type, preferably not exceeding 3000 words will be considered but the authors are expected to be a recognized authority on the topic and have carried out work in the relevant field.

Historical Articles. Articles of this type are generally encouraged, but it is obvious that they have to provide some new information or interpretation, whether it be observed in the present or in the past. The interpretation should be made by experts in the field who have a sufficient knowledge of its early development and methodology.

Radiology in Focus. Short reports on cases in which the radiology has been crucial in the making of the diagnosis or the management of a particular case now available for the future. A point is to encourage radiologists to produce material of particular interest in the specialty and to encourage cooperation in this field. Only presentations with first class illustrations can be accepted and these must emphasize a problem of unusual clinical interest.

Pathology in Focus. Articles which are of pathological interest with particular emphasis on the way the diagnosis was achieved now appear on a monthly or bimonthly basis. It is hoped that clinicians will involve their pathologists in these reports, and all illustrations must be of first-class quality. Where a department, particularly those overseas, may not have such specialized facilities. It may be possible, if a block or several unstained sections are provided for our Adviser to produce or supply an illustration submitted. Only contributions of particular pathological interest will be accepted.

Clinical Studies. Short reports of cases of particular interest have always been well-received. This section will be used on an occasional basis. Examples of material suitable for inclusion under this title would be, for example, a piece about a well-known person or for example an instrument associated with him, but those from within a Hospital’s own department who have made a hitherto less well-known contribution would be welcome.

Audit. Articles should be of general audit interest—not specifically departmental. It should always be demonstrated that the ‘audit cycle’ has been completed.

‘Silence in Court’. Articles on medicolegal topics are welcome but a preliminary letter written beforehand is requested to ensure that the contribution would be appropriate.

Short Communications. This feature will be used on an occasional basis. Examples of material suitable for inclusion under this title would be, for example, a piece of work which was of clinical interest but had failed to produce findings which were of statistical significance; where an investigative technique has been applied to produce material of particular interest in the specialty and to encourage cooperation in this field. Only presentations with first class illustrations can be accepted and these must emphasize a problem of unusual clinical interest.

Pathology in Focus. Articles which are of pathological interest with particular emphasis on the way the diagnosis was achieved now appear on a monthly or bimonthly basis. It is hoped that clinicians will involve their pathologists in these reports, and all illustrations must be of first-class quality. Where a department, particularly those overseas, may not have such specialized facilities. It may be possible, if a block or several unstained sections are provided for our Adviser to produce or supply an illustration submitted. Only contributions of particular pathological interest will be accepted.

Oncology in Focus. This new feature is for papers concerned with oncological treatment and investigation.

Letters to the Editor. This feature has been re-introduced to give those who wish to comment about a paper previously published within the Journal, an opportunity to express their views. Wherever possible the original author is asked to add his further comments. Such letters should be sent as soon as possible after publication of each month’s issue of the Journal in the hope of including them early thereafter.

Mini-papers, such as those which appear in the British Medical Journal, Lancet, or New England Journal of Medicine, will not be acceptable except on the rare occasions that they bring information of immediate interest to the reader.
The 5th Nottingham Endoscopic Sinus Surgery Course

19th - 20th June 1997

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17–20 JUNE 1997

The course is designed to cover the important aspects of middle ear surgery, with particular emphasis on the various types of ossicular reconstruction. There will be live surgery demonstrations and a temporal bone workshop.

Venue:
The Ipswich Hospital NHS Trust
Addenbrooke’s Hospital NHS Trust

Speakers:
Mr M Yung, Mr R Gray, Mr B Bingham
Mr D Moffat, Prof A Wright, Mr R Youngs

Registration Fee:
£400

For further details, please contact:
Mrs Jan Flowers, The Ipswich Hospital NHS Trust,
Ipswich, Suffolk IP4 5PD. Tel: 01473 703527

MEETINGS
7 MAY
and
23–26 JULY 1997

Friday 7th May 1997

Otology
10.30 am Neuro-Otology at Queen Square
(In memory of the late Dr M Dix MD, FRCS, 1911–1991)
Introduction Dr D Hood
Benign Positional Vertigo Professor L Luxon
Optokinetic Nystagmus Dr A M Bronstein
Clinical Presentation of Central Vestibular Disorders
Dr R Davies
Huff, Puff and All Fall Down Mr H Ludman
Effects of Vestibular Nerve Section on Mr G Brooks
Cochleo-Vestibular Physiology
Newer Tests and their Clinical Application Dr M Greesty

Laryngology & Rhinology
2.30 pm Short Papers

Wednesday–Saturday 23–26 July 1997

Joint Summer Meeting, Boston, Massachusetts, USA
Second US/UK Joint Otolaryngology Meeting
(Second AAO-HNSF/PSEF Joint Meeting)

For further details please contact
Jenny Stubbs, Academic Department, Royal Society of Medicine,
1 Wimpole Street, London W1M 8AE
Tel: 0171 290 2984 Fax: 0171 290 2989

The University of Adelaide and The Flinders University of South Australia

PROFESSOR OF OTOLARYNGOLOGY
HEAD AND NECK SURGERY
(Ref: 4852JL)

Department of Surgery

The roles of the Professor include providing leadership within the specialty in South Australia, leading of research activities in the Department, providing high level specialist services to the teaching hospitals of The University of Adelaide and Flinders University of South Australia, supervising the teaching programs and participating in the postgraduate training programs of the two Universities.

The current interests of the Department include sinus surgery, otology, head and neck surgery, voice disorders, laryngology and phonosurgery. Applications would be welcomed from surgeons with a distinguished record of research and clinical activity in any major branch of Otolaryngology.

The successful applicant will have the status of a Head of Unit at either The Queen Elizabeth Hospital or Royal Adelaide Hospital depending on the applicant's clinical and research interests.

The appointee must have medical qualifications which are registrable in South Australia and which will enable registration as a specialist surgeon.

Provision is made for up to 20% of the appointee’s time to be available for private practice in accordance with the University’s rules relating to the practice of a discipline.

The position is available immediately as a five year appointment, renewable.

Further information concerning the duties of the position, including selection criteria, may be obtained from Professor DB Frewin, Dean of the Faculty of Medicine, telephone (61-8) 8303 5193, or Professor GJ Maddern, Director, Division of Surgery, telephone (61-8) 8222 6756.

SALARY per annum: A$81,780 plus a clinical loading of A$14,156 per annum.

In addition, the South Australian Health Commission provides a salary supplement to bring the income of Professors undertaking approved specialised patient services, to an equivalent level to the full time hospital consultant salary scale. They will also be eligible for on call and recall payments.

APPLICATIONS, IN DUPLICATE, addressing the selection criteria and quoting the reference number should include residency status, names and addresses of three referees to the Director, Personnel Services Branch, University of Adelaide, Australia, 5005 by 13 May 1997.

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The Journal of Laryngology and Otology was the first British journal in the ENT field. Since 1887, it has remained the definitive information resource for surgeons, consultants and students. The Journal is run as a charity to promote education and knowledge in all spheres of Laryngology, Rhinology, Otology and related fields.

The JLO is very much an international journal with contributors from around the world and readers from over 80 countries.

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REVISION COURSE IN OTOLARYNGOLOGY

DEPARTMENT OF OTOLARYNGOLOGY

Monday 15th September to Friday 19th September 1997

The course, which is intended for those preparing for post-graduate examinations, will cover all aspects of modern Otolaryngological theory and practice.

 Lectures will be given by senior members of staff of the department.

Further particulars and application forms from:

Mrs A J Pryde, Unit Secretary
Department of Otolaryngology, City Hospital
Greenbank Drive, Edinburgh EH10 5SB
Tel: 0131 536 6345 Fax: 0131 536 6167

Course Fee: £350.00

Course organiser: Mr D W Sim

EXPLORE

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Index 1995

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THE 8TH OXFORD COURSE IN ENT RADIOLOGY

This two day course is designed to meet the needs of both radiologists and ENT surgeons facing the challenges of modern imagery, and surgical practice.

The course is divided into 4 half-day blocks covering most aspects of head and neck radiology. This year's course will have a special emphasis on oncology.

As before, this course is limited in numbers in order to encourage discussion between faculty, surgical and radiological delegates.

Date: 15/16 May 1997
Venue: Cotswold Lodge Hotel, Central Oxford.
Cost: £375 Residential
      £325 non-residential

Special rates are available if a joint application is made for a surgeon and radiologist from the same hospital.

Information and registration forms available from
Christine Westwood, Academic Secretary, telephone/fax 01865 224544

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Mrs Sheila Fisher  Dr David Morgan

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Tel: 0115 9856 545  Fax: 0115 9856 533

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10th Combined British Universities Advanced Otology Course

To be held in Birmingham from

Sunday 21 September – Friday 26 September 1997

This highly successful course will be held again at the University of Birmingham Conference Centre, Edgbaston Park Road, Birmingham.

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The Faculty:

Mr D W Proops and Mr A L Pahor (Birmingham) – Course Organisers
Mr D Adams (Belfast)  Mr M R Mills (Dundee)
Mr G Brookes (London)  Mr D Moffatt (Cambridge)
Professor G G Browning (Glasgow)  Professor R Ramsden (Manchester)
Mr A Kerr (Belfast)  Mr R C Swan (Glasgow)
Mr J Robinson (Gloucester)  Mr J Toner (Belfast)

C.M.E. Accreditation applied for – Anticipated number of credits 28

Enquiries and applications from:

Miss S J Griffiths at the Postgraduate Education Centre, City Hospital NHS Trust,
Dudley Road, Birmingham B18 7QH.
Telephone No.: 0121 507 4489/4980  Fax No.: 0121 523 4562

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