

Reviews of Books

of this particular work separately in England. The question is as yet undecided. Until then, this account is only available in German. It can be recommended very strongly indeed to all those anxious to possess an authoritative knowledge of the subject.

ALEX. R. TWEEDIE.

Nowvel Appareil Perfectioné (pour l'Obtention de Stéréogramme du Larynx sur le Vivant). Docteur GAREL DE LYON.

This is a very short pamphlet describing the improved apparatus for stereo-photographing the larynx, with a description of the method employed, along with one or two examples of the photograph so obtained. The apparatus consists of a prismatic stereoscopic camera with a "blind" shutter. A special laryngoscopic mirror fits in to the socket alongside of the camera aperture; on the other side, there is a bull's-eye projector with a small half-watt lamp. This is connected through a rheostat with the main electric supply and is controlled by a foot-switch, the first pressure of which switches on the lamp while pressure with the toe releases the shutter.

The apparatus can also be used in sunlight, but the proper direction of the beam of sunlight is very difficult to obtain, though the photographic results are apparently much better.

Directions for developing and mounting stereoscopic plates are given.

There is no mention of the price of the apparatus. It seems simple enough apart from the prismatic lens, and results are apparently very good considering that they are indirect images in a laryngoscopic mirror.

G. EWART MARTIN.

LETTERS TO THE EDITORS

TO THE EDITORS,

Journal of Laryngology and Otology.

SIRS,—A case was recently contested under "The Workmen's Compensation Act," the essential points of which were as follows—

A man of 35, previously quite healthy, received a blow on his nose, whilst working as a coal miner.

The injury resulted in concussion (he was stated to have been unconscious one hour), and a depressed fracture—dislocation of the nasal bone, combined with intranasal damage, and deformity causing complete bilateral occlusion of the nasal passages.

His immediate recovery was uneventful, and arrangements were made, some six months later, for an intranasal operation in order to

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correct the obstruction, when the inflammatory disturbance had subsided sufficiently.

Meanwhile, although the nasal obstruction remained complete, he had attempted to resume work on more than one occasion, but found he could not manage it.

Nine months after the accident, and before it had been possible to admit him to hospital for the proposed operation, he contracted pneumonia, which proved fatal. He was paid compensation until the day of his death.

The widow claimed compensation for the death on the grounds that the complete nasal obstruction was either contributory to the incidence of the pneumonia, or, that it prejudiced his chance of recovery therefrom.

Without wishing to question the ruling of the learned judge, who no doubt disallowed the claim on correct legal principles, I would submit the judicial attitude towards this case raises a question of supreme importance in rhinology.

Have all our efforts towards the relief of intra- and post-nasal impairment of obstruction, during the past eighty odd years, been performed for entirely other reasons, and based on a misconception of the relation between these disabilities and pulmonary inefficiency and disease? Are our ideas on the necessity for the proper functional physiological integrity of the nose erroneous?

If an incomplete nasal obstruction, to which the patient may, so to speak, have gradually accommodated himself, be regarded as prejudicial, *inter alia*, to the welfare of the respiratory tract—as I think is generally admitted by rhinologists—how much more of a disability must be a complete sudden occlusion to one who hitherto has utilised the nose to its full extent.

The columns of your Journal have been offered for the ventilation of controversial points, and I venture to send these notes in the hope that they may lead to an expression of opinion, or that the subject may possibly be regarded of sufficient interest to warrant a discussion by members of our specialty.—Yours, etc.

ALEX. R. TWEEDIE.

NOTTINGHAM,
4th March 1924.

TO THE EDITORS,

The Journal of Laryngology and Otology.

SIRS,—In the *Journal* of September 1923, you published a paper by me upon "Injury to the Larynx induced by X-ray Treatment." I have just noticed that there is an important misprint in it. On lines 6 and 7 it is stated, "Between 1915 and 1921, she was frequently