

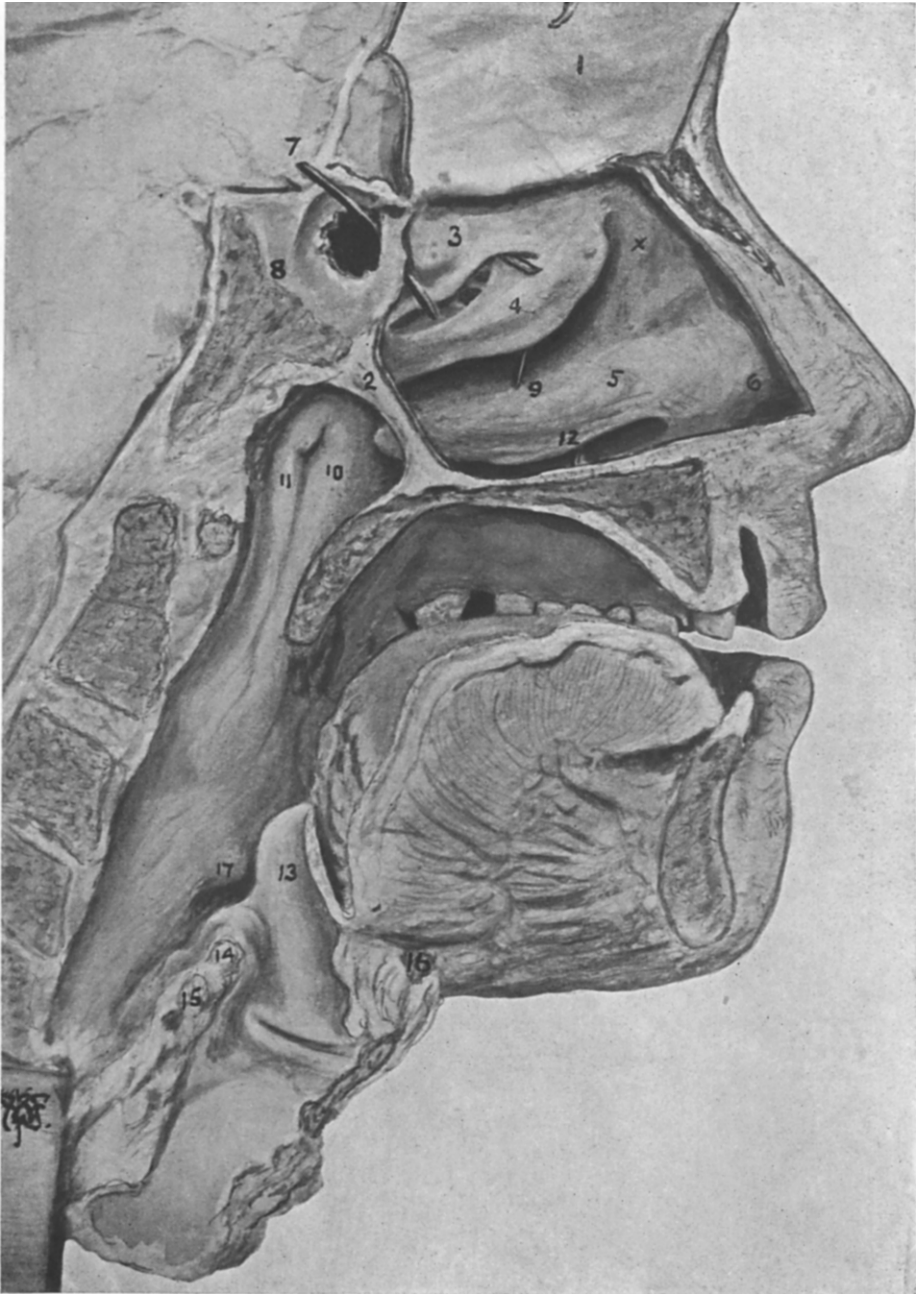
DISEASES OF THE  
UPPER RESPIRATORY TRACT  
THE NOSE, PHARYNX & LARYNX

*P. WATSON WILLIAMS*

DISEASES OF THE  
UPPER RESPIRATORY TRACT.

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## THE UPPER RESPIRATORY TRACT.

From a Male subject, reproduced five-sixths actual size ; being about the actual size in the Female.

#### THE UPPER RESPIRATORY TRACT.

*A Dissection to show the anatomical relations of the interior of the nose, rhino-pharynx, pharynx, and larynx, and the various structures entering into their formation.*

A vertical mesial section has been made, and the septum nasi (1) cut and raised to show the structures on the outer wall of the nose, the posterior margin of the septum nasi (2) being left *in situ* to show its relations to the Eustachian tube, etc.; (3) the superior, (4) the middle, (5) the inferior turbinated bodies, collapsed and shrunken, beneath which are respectively the superior, middle, and inferior meatuses. The left sphenoidal sinus has been broken into and a bristle passed through its aperture of communication with the superior meatus. More anteriorly, in the superior meatus, is seen a bristle passed into an opening into the posterior ethmoidal cells. Additional apertures are seen beneath this bristle; (6) the vestibulum nasi; (7) corresponds with the inter-peduncular space, the anterior cerebral artery appears immediately in front of the figure; (8) the body of the sphenoid; in the middle meatus is seen a bristle (9) passed upwards and forwards through the hiatus semilunaris and infundibulum, to the frontal sinus; (10) is placed on the salpingo-palatine fold, the orifice of the Eustachian tube is seen, and behind it (11) the salpingo-pharyngeal fold, the fossa of Rosenmüller being above and behind the posterior lip of the Eustachian; (12) a bristle passed into the lower end of the nasal duct; (13) the epiglottis; (14) the left arytenoid cartilage, just above it is the prominence of the cartilage of Sanatorini, and, more externally, of the cartilage of Wrisberg; (15) cricoid cartilage; (16) section of the body of the hyoid bone; (17) is on the prominence produced by its greater cornu; between 17 and the epiglottis is the fossa innominata, or pyriform fossa; the orifice of the left sacculus laryngis is seen bounded by the vocal cord below and the false cord above; (X) agger nasi, and below this eminence is the atrium meatus medii.

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DISEASES OF THE  
UPPER RESPIRATORY TRACT

*THE NOSE, PHARYNX AND LARYNX.*

BY

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1901.



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TO  
EDWARD LONG FOX, M.D. (OXON.), F.R.C.P.  
AND MY COLLEAGUES  
ON THE STAFF OF THE BRISTOL ROYAL INFIRMARY.

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## *Preface to the Fourth Edition.*

THE last edition of this Manual has long been sold out, the delay in the preparation of the present issue being due in part to the technical difficulties that had to be overcome in the reproduction of stereoscopic plates and in providing a suitable stereoscope which should be simple in use and always ready for reference to the plates.

The text has been revised throughout, largely re-written, and brought up to date, without departing from the original design, viz., a simple, concise, and thoroughly practical textbook on a scientific basis, affording information on every point likely to come within the needs of the practitioner and student of laryngology. Nevertheless, the size of the volume has considerably increased, mainly from amplification of the sections on "Diphtheria" and on "Diseases of the Nasal Accessory Sinuses," and to a very large increase in the number of illustrations. Some new sections have been added on subjects of clinical importance, all of which should make the book of greater service in actual practice. Yet by the introduction of smaller type the reader is enabled to disregard matters of detail, which would be of interest mainly to the advanced student or to the practitioner for reference.

It is often very difficult to obtain access to good anatomical preparations of special regions, and therefore I believe that the stereoscopic plates will be very helpful in affording realistic illustrations of the clinical anatomy of the nose, pharynx, larynx and ear, familiarity with which is absolutely essential for successful practice.

In addition to those I have already had occasion to thank, I must express my deep obligation to Sir Felix Semon for many hints and invaluable help in my work afforded during our recent collaboration in joint contributions to Prof. Allbutt's "System of Medicine"; to Drs. Gleitsmann and Chappell, of New York, Prof. Hamilton, and Drs. StClair

Thomson, Middlemass Hunt, Tilley, Walker Downie, besides many others, for kindly providing me with illustrations which depict various diseases in phases more typical than have occurred in my own practice, or, at least, in my collection of drawings; also to Dr. Dundas Grant, the late Prof. Kanthack, and other friends, for assistance in various directions.

Owing to the limitations of space imposed on me, it has been impossible to realise my wish to introduce a complete bibliography, or even to make all the acknowledgments that laryngology owes to many original workers. But I have been especially indebted to the "Centralblatt f. Laryngologie und Rhinologie," and to the "Journal of Laryngology, Rhinology and Otology," for many references and much aid.

Further, I would gratefully acknowledge the valuable co-operation of Drs. Geo. Parker and Kenneth Wills in the revision of proof sheets.

P. W. W.

I, VICTORIA SQUARE,  
CLIFTON,

*March, 1901.*

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*From the Preface to the Third Edition.*

THE fact that the First Edition of this work was sold out within a few months of its appearance, and that the Second Edition of a thousand copies has in the meantime become exhausted, is sufficient to indicate that it was needed.

Illustration is essential in describing affections the diagnosis of which largely depends on the appearances presented, and, with few exceptions, I have reproduced sketches from my clinical notes, believing that they will convey the most accurate idea of the aspects of disease, without elaboration.

I am under a sense of deep obligation to Dr. McBride, and Mr. Young J. Pentland, for permission to reproduce *Fig. 3, Plate IV*; to Professors Chiari, Emil Zuckerkandl, Dr. Riehl, of Vienna, and to M. Wagner, of Lille, I am similarly indebted; while I beg also to thank Dr. W. P. Northup, of New York, Mr. Mark Hovell, the "Scientific Press," and Messrs. J. Wright & Co., for their assistance in preparing the work for the press.

P. W. W.

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*ERRATA.*

- Page 3, line 10, for "ethnoidal" read "ethmoidal."*  
.. 15, .. 5 *from the bottom, for "instrinsic" read "intrinsic."*  
.. 23, .. 4, *for "viz." read "and."*  
.. 23, .. 8, .. "palantine" *read "palatine."*  
.. 59, .. 28, .. "Dalton's" *read "Galton's."*  
.. 60, .. 12, .. "fenestrum ovale" *read "fenestra ovalis."*  
.. 61, *for "Rinné" read "Rinne."*  
.. 61, *line 2 from the bottom, for "points to" read "Rinne +  
points to."*  
.. 67, *line 5, for "three fourths" read "half."*  
*Plate xxxvii, Fig. 2 is the left side and Fig. 3 the right side.*