A CASE
OF
OSSIFICATION AND BONY GROWTH
OF THE
CARTILAGES OF THE LARYNX,
PREVENTING DEGLUTITION.

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COMMUNICATED BY
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MRS. M. about 50 years of age, who up to this period of life had uniformly enjoyed a good state of health, early in the spring of 1815, began to experience some uneasiness when she attempted to swallow ; this she attributed to a slight enlargement of the left tonsil. The difficulty which attended deglutition, however, increased so rapidly, that she was soon compelled to relinquish solid food, and to support herself solely upon spoon victuals ; in the course of a little time even this mode of sustenance was almost denied to her, when becoming alarmed for her situation, about the beginning of the month of October, she consulted a respectable surgeon of this town, who observing the

tonsil to be enlarged, prescribed an astringent gargle with an alterative course of calomel. At the expiration of a fortnight, this treatment having failed to afford any relief, I was requested to visit her in conjunction with Mr. Calton, surgeon, of South Collingham. The tonsil had increased to the size of a walnut; it appeared to be firm in its structure, and protruded considerably over the entrance to the pharynx; to this cause solely, our patient attributed her present state of suffering; at our request she endeavoured to swallow a little milk and water; this she at length effected, but not without much pain and difficulty. As the further administration of medicine was not in our opinion likely to prove beneficial, and as the situation of the patient was such as to require immediate assistance, we determined upon removing the diseased gland. On the succeeding day therefore the operation was performed by Mr. Calton, in the following manner; a small curved needle having attached to it a silk thread, and firmly held between a pair of forceps, was passed through the centre of the tumor; it was then brought out of the mouth, and being cut off, the two ends of the ligature were united, forming a kind of bridle, which being held by an assistant, the surgeon with a spatula in his left hand depressed the tongue, whilst with a small scalpel in his right, he removed the diseased gland, which in structure appeared to be cartilaginous, having a cyst for its base, from which nearly a table-spoonful of caseous fluid was discharged. The disease being

apparently removed, we requested our patient to renew her attempts to swallow some milk and water, but to our concern the difficulty still existed, and hardly any advantage seemed to have been gained by the operation. We now began to suspect that we had mistaken the true cause of obstruction, and our suspicions were soon confirmed, for upon passing the index finger of the right-hand as far as it could reach down the œsophagus, a projection was distinctly felt filling up the whole of the canal, except at its left and posterior part, where only a small dilatation could be perceived; into this a common urethral bougie was introduced, and every warrantable degree of force was used for the purpose of urging it forwards, but without success. As the nature of this projection could not from its peculiar situation be distinctly ascertained, we did not feel ourselves justified in having recourse to the aid of instruments; our patient was already on the brink of exhaustion; nourishing glysters were frequently administered, but upon this feeble support life could not be expected long to exist, and in less than a fortnight after the operation, this melancholy case terminated fatally. Leave being obtained to inspect the body, the following appearances were observed on dissection. The cricoid and arytenoid cartilages were much increased in size, and completely converted into bone; by pressing upon the œsophagus an obstruction was offered to the passage of food, and a distinct circular line was seen upon the posterior part of the

œsophagus, occasioned by the pressure of the cricoid cartilage; both above, and below the obstructed part. The œsophagus was natural in appearance. The remaining cartilages concerned in forming the larynx and trachea appeared in a slight degree to partake of the same morbid change. The thyroid gland was not increased in size, but it was firmer than usual, and many small depositions of bone were distributed throughout its substance.