On the use of the artificial membrana tympani in cases of deafness, depending upon perforation or destruction of the natural organ: with an introduction / by F.A. von Moschzisker.

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VON MOSCHZISKER (F.A.)

ON THE USE

OF THE

ARTIFICIAL MEMBRANA TYMPANI

IN CASES OF DEAFNESS

DEPENDING UPON PERFORATION OR DESTRUCTION
OF THE NATURAL ORGAN;

WITH AN

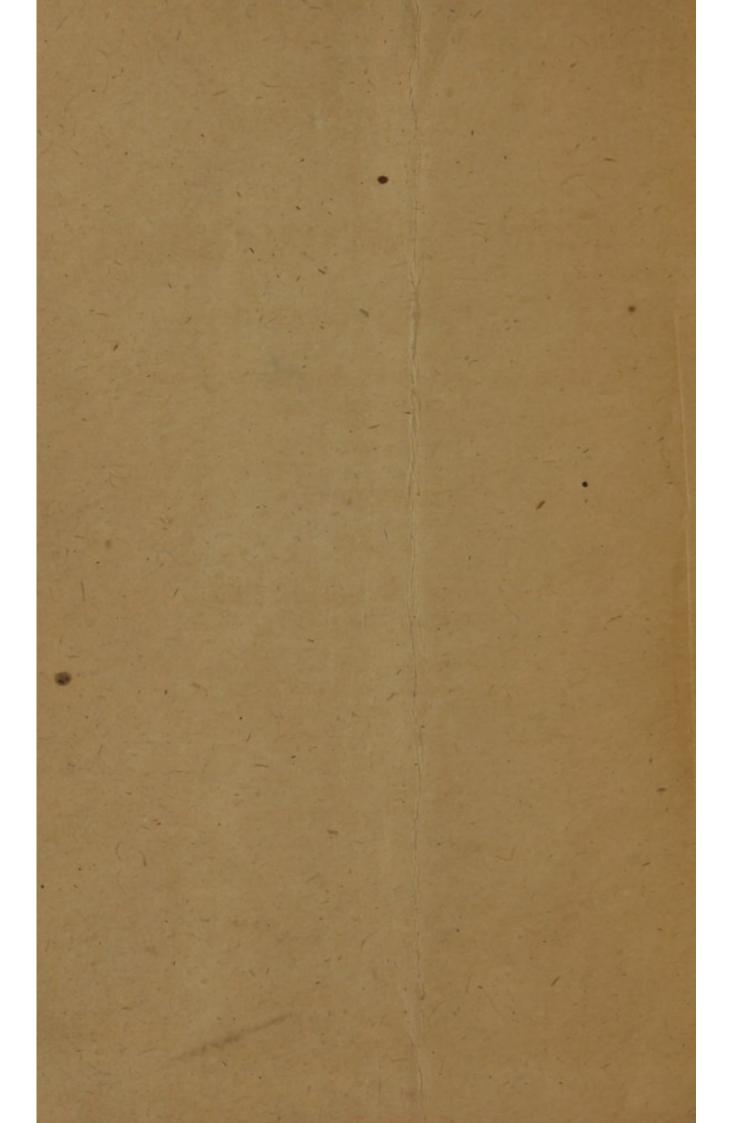
INTRODUCTION

BY

DR. F. A. VON MOSCHZISKER, OCULIST AND AURIST:

Author of "A guide to Diseases of the Eye;"
"Spectacles, why and when to use them;"
"The Ear and its Treatment."

PHILADELPHIA:
Town, Printer, No. 34 FranklinPlace.
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INTRODUCTION.

Hearing is one of the most important functions of the life of relation. Its deprivation is to man a source of of suffering, and its exercise one of great enjoyment. The organ designed for the performance of this important function is subjected, as all other organs and senses, to numerous diseases; yet the Profession, in a body, must acknowledge, that in this country, the diseases of the Ear, and their knowledge as a science, have entirely been neglected and almost utterly consigned to the treatment of the ignorant and unprincipled empiric. In France, Germany and the Continent, Deafness is much more unfrequent, and this can only be accounted for, by the greater amount of attention given to the diseases of the Ear, by men who devote themselves to the Profession of Aurists and Oculists.

We have often heard complaint of the neglect with which diseases of the Ear have been treated, and it is not an unjust one, as long as the Profession will not make this branch of Medical Science a Specialty, and pay more attention to it than they have hitherto; therefore most cases of deafness fall into the hands of quacks and imposters, who either employ themselves or advertise their stimulating and irritating nostrums.

This pernicious practice of applying compounds of powerfully acting remedies, to all diseases of the Ear,

without any distinction of the cause or seat of the disease, must naturally produce more mischief than the actual dis-The causes of deafness are innumerable; every day, and particularly since the introduction of Kramer's most scientific Instrument, the Ear Lantern, Aurists discover those which are new and at times easily removed either by Medical or Surgical treatment; but easily as they may be removed by one who understands their treatment we cannot but remark that Patients ought to be particular to whom they intrust so important an organ. For the result of tampering with the Ear, situated as it is so close to the brain, has frequently been known to bring on permanent deafness and even death itself; on the other hand we would say that persons, who, if they suffer the least inconvenience in any of their functions, would immediately apply for Medical relief, and submit to any, even the most severe form of treatment, will patiently permit the sense of Hearing to be greatly impaired, nay lost on one side, without making any effort for its restoration, and when they do consult an Aurist will often state that they have been told that nothing could be done for them, and therefore they suffered from the most unfortunate affliction for years and years, from a cause, which, by a due recognition of the disease, is often easily removed by the right treatment.

As in all diseases, so especially in Aural affections, the first grand point is accuracy of Diagnosis, without which all treatment must be empirical, and to arrive at which it is indispensably necessary that we should be thoroughly acquainted with the best mode of conducting an exami-

nation. I have seen cases which I can refer to, in which the Patients were subjected to the severest treatment, such as cupping, blistering, salivation, purgation, &c., when I discovered that the causes of their deafness were simply hardened wax pressing on the drum of the Ear, or even a single hair.

It is with no small gratification and pleasure that I am able to refer to my labors in this branch of Medical Science, and to name hundreds on hundreds of cases of Deafness, I have restored, some of from twenty to thirty years standing, and can refer to persons in the Profession of the highest authority, as well as those in social positions of the most elevated character. During my five years residence in Baltimore* and my stay in the South, I have received numerous letters full of expressions of gratitude. The Profession have from time to time read in divers publications of my mode of treating both Medically and Surgically, the Eye and Ear, and I will here express in the name of the Profession, the thanks of gratitude we owe to Dr. Toynbee of London, one of the first English Aurists, for his valuable discovery of the Artficial Membrana Tympani, in cases afness.

^{*} See appendix.

ON THE FORMATION AND USE

OF

AN ARTIFICIAL MEMBRANA TYMPANI.

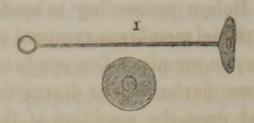
The destruction of the Membrana Tympani being the consequence of so many maladies to which the Ear is subjected, that I was led to attempt the construction of an artificial membrana tympani, which it was hoped might serve as a substitute for the natural membrane, so far, at least, as its function of closing the tympanum and of rendering its walls resonant was concerned.*

* My hopes of success were strengthened by the result of some observations I had made upon cases of perforate membrana tympani. When these cases are not complicated with any other serious lesion of the or gan, it must have been remarked, by others as well as myself, that the patient, from some inexplicable cause, at times suddenly hears perfectly well, or nearly so. This improved hearing sometimes remains a few minutes only, at others for one or more hours. Having found this improvement to follow the use of a syringe and tepid water, or even of the pocket-handkerchief, I examined the ear in certain patients, after these operations had been effected, and I found in the former case that a bubble of water, and in the latter of discharge filled up the orifice in the membrana tympani. Upon destroying the bubble, the improvement in hearing at once disappeared. In one patient I was able to keep up the improved hearing, by the use, from time to time, of a solution of gum acacia in water. Upon reconsidering these facts, since I completed the observations upon the closed state of the tympanic cavity, I have arrived at the conclusion that the bubble of water, discharge or mucilage, acted beneficially, by again confining sonorous undulations to the tym-

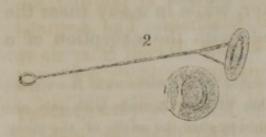
After some experiments I tried vulcanized india rubber and gutta percha, making use of the thinnest layers of them that were procurable. With both these substances I succeeded in making a rude kind of artificial membrana tympani, by cutting a portion about the size of the natural membrane, and passing through it a piece of thread, by means of which and a fine tube it could be passed down to its proper situation. The tube was then withdrawn, and the thread alone left in the external meatus, by which the artificial membrane could be withdrawn at the pleasure of the patient or the operator. The disadvantages attaching to this apparatus were, difficulty of applying it on the part of the patient; liability of the material to be torn by the thread; and unsightliness of the latter hanging down from the meatus. The experiment however, was sufficiently satisfactory to induce me to request Messrs. Weiss to construct one, the centre of which should consist of two very fine plates of silver, having a diameter of about three quarters of a line, between which the layer of vulcanized india rubber or gutta percha might be placed, and to the outer surface of one of these plates a silver wire was to be attached. The artificial membrana tympani made by Messrs. Weiss, from these directions, has hitherto been perfectly successful. As supplied by them, the portion of vulcanized india rubber or gutta percha is about three quarters of an inch in diameter, which leaves sufficient margin for the surgeon to cut out a membrane of any shape that may seem to him desirable, and to leave the silver plate, either in the

panum, and this conclusion has been strengthened by subsequent observations.

centre or towards the circumference, at his discretion.* (Figure 1.) The silver wire is of sufficient length to admit of the membrane being introduced or



withdrawn by the patient, but is not perceived externally except upon especial observation. A second kind of artificial membrane is made by fixing the layer of gutta percha or vulcanized india rubber between two very delicate silver rings from the eighth to the sixth of an inch in diameter; these rings are rivetted together, leaving a portion of the membrane drawn moderately tense in their centre; a margin of the membrane is also left beyond the circumference of the rings, so as to prevent the latter being in contact with and irritating the tube of the ear. To the surface of one of these rings the silver wire is fixed by two branches, and they should be joined so that the outer surface of the rings should look obliquely outwards and forwards instead of directly outwards, thus imitating the direction of the natural membrana tympani. This kind of membrane is often preferable to that pre-



viously described, if the meatus is sufficiently large to admit of its passage (Figure 2.†) A pair of forceps is made whereby the artificial membrane can

be more easily introduced and withdrawn.

^{*} I now invariably use vulcanized india rubber, not much thicker than ordinary brown paper.

Before proceeding to speak of the mode in which the artificial membrana tympani should be applied, it is necessary to premise a few words on the diseases which usually cause perforation or destruction of the natural membrane, and upon the condition of the structures which remain. The most frequent of these diseases is catarrhal inflammation of the mucous membrane lining the tympanic cavity. It is one of those usually styled otorrhæa, of which a particular account will be found in the paper cited in the margin. † This disease generally follows an attack of scarlet fever, scarlatina, measles, or any ordinary cold, and it usually occurs in children having a tendency to enlargement of the glands. The tympanic mucous membrane becomes thickened, and secretes so large a quantity of mucous of so viscid a character, that it cannot escape through the Eustachian tube; consequently, it gradually distends the tympanic cavity and presses upon the inner surface of the membrana tympani, a portion of which, generally posterior to the malleus, begins to ulcerate, and an aperture is at length produced, through which the mucus exudes into the external meatus. This orifice is in some cases not larger than a small pin's head. in others it is a line in diameter, while in many cases the entire membrane is destroyed, with the exception of a

[†] In some cases, however, it produces a loud noise as if it were too tense; it would, perhaps, be desirable to have it made with only one branch, so that the surgeon may be able to alter the angle of the membrane with the stem, according to the case.

[‡] On the Nature and Treatment of those Diseases of the Ear which have hitherto been designated Otorrhæa and Otitis. Transactions of the Provincial Medical and Surgical Association, vol. xviii, 1851.

margin at the circumference about half a line in diameter, which, being composed of the combined fibres of the thickest portion of the circular and radiate laminæ, generally remains. This margin is deepest at the upper part. In some rare cases, the long process of the malleus continues entire after the complete destruction of the membrane to which it was attached; but, as a general rule, the whole of this process is gradually absorbed, leaving merely the head of the bone which articulates with the incus, the neck, and the body which receives the attachment of the tensor tympani ligament internally; anteriorly and posteriorly the fibres of the remnant of the membrane are attached, and externally the processus brevis remains. It will therefore be understood that, in cases of so-called destruction of the membrana tympani, a margin is generally left, to which the body of the malleus remains fixed, and to the inner part of which the tensor tympani ligament and muscle are attached, affording the means by which the small bones and muscles of the tympanum are still enabled to perform their functions. In cases of general ulceration of the mucous membrane of the tympanum, which fortunately seldom occurs, the incus is generally discharged, and sometimes the malleus also; but even in these cases, if the attachment of the stapes to the circumference of the fenestra ovalis remain uninjured, the power of hearing may be much improved: should the stapes however be removed, total and irremediable deafness ensues.

The other disease through which an orifice in the membrana tympani is usually effected, is ulceration of the sult of inflammation of the dermoid layer, which spreads first to the radiate fibrous and thence to the circular lamina. The laminæ, being weakened by the ulcerative process, fall inwards as far as the promontory, to which they often ultimately adhere, and, when an orifice has been thus produced, its margins are not unfrequently drawn into the shape of a funnel, whose inner part adheres to the tympanic walls. In ulceration of the membrana tympani, proceeding from the dermoid layer, the entire organ is very rarely destroyed, but an orifice merely is produced.

The cases in which the artificial membrana tympani is of the greatest benefit are those where there is a well defined aperture in the natural membrane, or, if it be entirely absent, where there is simple hypertrophy of the mucous membrane of the tympanum, with or without discharge from its surface. In these cases, it will be found that the organ has by no means entirely lost its power of discerning sounds; as a general rule, the human voice is heard when the mouth of the speaker is situated within alout a foot of the patient's ear, and when the words are spoken slowly and distinctly. The diminished power of hearing just noticed, while it entirely excludes the sufferer from the advantages of general conversation, is, however, greatly aggravated when, to the affection of the membrana tympani and mucous membrane of the tympanum, the stapes has become ankylosed to the fenestra ovalis, or the nervous expansions have been injured. In such cases where the patient require to be shouted to close to the ear, the artificial membrane will not prove of any service.

THE MODE OF APPLYING THE ARTIFICIAL MEMBRANA TYMPANI.

As in cases of perforation or destruction of the membrana tympani there is so frequently catarrhal inflammation of the mucous membrane of the tympanum, it is obviously important that no foreign substance should be placed in contact with that membrane; and, as there is always a margin of the membrana tympani remaining, the object of the Surgeon should be to keep the artificial membrane external to the latter. After carefully noting the size of the inner extremity of the meatus to which the natural membrana tympani was attached, the operator should then cut the artificial membrane as nearly of the size and shape of the natural one as possible, taking care at the same time to keep the margin quite smooth and regular.* The patient must then be placed with the head inclined to the opposite shoulder, while a strong light is thrown into the meatus, which if liable to discharge should have been previously syringed. The operator will now take the artificial membrane, and having moistened it with water, pass it, by means of the silver wire, gently inwards, until it has reached what he considers the

^{*} In cases where only a small border of the natural membrane remains, it is often desirable to cut the artificial membrane of a size larger than the inner extremity of the tube, so that its edge may turn outwards.

natural position. This he will ascertain by the occurrence of a faint bubbling sound, caused by the escape of the slightly compressed air beyond it; he will also feel a slight obstruction offered to its further passage by the remnant of the natural membrane. Should he attempt to pass the artificial membrane beyond this point, the patient will complain of pain, which until then had not been felt. The most certain test, however, of the artificial membrane having been properly placed is the sensation of the patient, who discovers, by the sound of his own voice, or that of the surgeon, or by the movement of his tongue and lips, that his hearing has been suddenly much improved.

It will be imagined that great care must be taken to cut the membrane so that it shall fit the inner extremity of the meatus with exactness, since if too large it would cause discomfort, and if too small it would not fulfil its purpose of rendering the tympanum an air-tight cavity. It is not easy, in all cases, to fit the artificial membrane exactly to the inner extremity of the meatus, so as not to allow of any communication between the air in the tympanum and that in the external meatus; this is, however, the object which should always be sought to be attained. At first, the patient should be instructed not to use the artificial membrane for more than two hours daily; and, if he complains of an uncomfortable feeling, one hour, or even half an hour, will be sufficient.

It would, perhaps, be expected that the contact of a foreign body, like the artificial membrana tympani, with the wall of the external meatus would soon become in-

patients have left my room without being able to say, from the sensation in the ear, whether any foreign body were there; many have now worn this apparatus daily, during several months, without having suffered the slightest pain. The explanation of this circumstance may be found in the fact that the most sensitive part of the meatus externus is about its centre, the membrane in the immediate vicinity of the membrana tympani not being so abundantly supplied with nerves: another explanation is that the circumference of the artificial membrane presses with extreme gentleness against the wall of the meatus.

The results of the application of the artificial organ have been much more satisfactory than I had reason to anticipate. I have already used it beneficially in nearly fifty cases. The substitution of a thin layer of vulcanized india rubber or gutta percha, for so exquisitely delicate a structure as the healthy membrana tympani, would be expected to afford but trifling aid; such, however, is not the case, for among the patients relieved by it most have heard the human voice perfectly across an ordinary sized room, and in one case the voices of boys in the open air were heard at a distance of between one and two fields. Surgeons, who have paid careful attention to diseases of the ear, will not be surprised at the efficient substitute the artificial membrane offers, as they will bring to mind many cases in which the natural organ has been greatly hypertrophied, especially in chronic inflammation of its dermoid layer, with but a very slight diminution of the power of hearing.

The surgeon having ascertained that the artificial membrane is beneficial to the patient, if no pain is experienced, it may be allowed to remain in the ear for a few hours, and gradually increased to the whole day: it is often desirable that the use of the membrana tympani should be preceded, or accompanied, by vesication over the mastoid process, whereby the thick mucous membrane of the tympanum may be rendered more healthy. In all cases, the artificial membrane should be removed at night, and, when there is any discharge, the ear ought to be syringed each night and morning with tepid water.

CASES.

Deafness for sixteen years, discharge from each ear for six years, aperture in each membrana tympani; power of hearing restored.

Peter Turnbull, æt. forty-three, formerly in the army, from which he was discharged on account of his deafness, was admitted, under my care, on the 12th of January, 1852. He stated that sixteen years ago, without any other assignable cause than a cold, he became slowly dull of hearing, and five or six years since he perceived a discharge from both ears, which has continued up to the present time. The power of hearing has been gradually diminishing, so that, at present, he requires speaking to loud, close to his head. Upon examination, an aperture between one and two lines in diameter was observed in each membrana tympani, and the mucous membrane of the tympanum, which was the source of the discharge, was more thick and red than natural.

The treatment consisted in keeping up counter-irritation over each mastoid process, and in the use of an injection composed of three grains of acetate of zinc, to an ounce of water. Under this treatment, he somewhat improved, but the hearing still remained so defective that he was precluded from following any avocation. In the commencement of June, I experimented on this patient with

the first artificial membrana tympani, composed of vulcanized india rubber, and the good effect was at onee decided. When it was placed over the surface of the original membrane, so as wholly to close the orifice, the patient made a movement of his lips, and said, "I hear as differently as possible from what I have done for many years; everything sounds clear!" This patient went away with the artificial membrane in his ear, hearing conversation perfectly. The following morning, he came to my house, saying that he had accidently moved what I had left in his ear, and that he was "as dull as ever." I replaced the artificial membrane—he again heard well, and being supplied with one which he could introduce or remove at pleasure, he has worn it during the day, ever since—a space of between three and four months—and he has never complained of pain or discomfort from it. Latterly, he has found the hearing so much improved that be has been able to dispense with the use of the artificial membrane for a few hours daily; but he hears much better with than without it. As a proof of the great amelioration that has taken place, this patient told me that while in the country lately, and using the membrane, he heard voices at a distance, and upon going towards the place from which they appeared to proceed, he found some boys under a hedge, more than a field distant from the spot where he heard them. He is going back into the army.

This patient was shown at a meeting of the Pathological Society of London, in February, 1853; the following is the published report:—"The artificial membranes having been removed, the members of the Society had the

opportunity of observing the perforate condition of each membrana tympani. After the removal of the membranes, he could not hear, unless loudly spoken to; but, when he had replaced them, which he did with apparent readiness, his hearing was excellent."—Medical Times and Gazette, February 12, 1853.

Each membrana tympani destroyed by measles at four years of age. Hearing restored by the artificial membrane. Very sensitive to sounds.

Miss B., æt. twenty-one, consulted me on November 9, 1853, on the recommendation of Dr. Grindrod of Seaforth, near Liverpool. Her health was good.—History of case, At four years of age she suffered from an attack of measles, which was followed by discharge from each ear; this has lasted to the present time, so that the ears require syringing every day. Since the measles, the power of hearing has been so much deteriorated, that it is requisite for her to be spoken to distinctly within the distance of a yard. Upon inspection, it was found that the membrana tympani of each ear had been destroyed, and that the only vestige of it was a very narrow margin. The mucous membrane lining the tympanic cavities was

very red, and much thicker than natural; it was covered by a mucous discharge. Treatment .- An artificial membrana tympani was introduced into each ear, the effect of which was to improve the power of hearing at once and so greatly, that the patient heard my voice perfectly well across my room, with my back turned towards her. Ordered to wear the artificial membranes during the day, to take them out at night, and to syringe the ears with warm water twice daily. 13th .- Has been wearing the membranes every alternate day, and has heard perfectly while they were worn. Indeed, the only drawback to her comfort has been the circumstance that her friends still speak loud to her, which causes considerable uneasiness in the ears from the very great sound. 16th .- Continues to hear well, but has been obliged to remove to a quiet street, as the sound of carriages passing through the street has been annoying. She complains of the "intolerable rustling" of her silk dress, of which she was never before conscious. The patient left London after some further watching, hearing quite comfortably. I received a letter from her in December, from which I subjoin an extract :-"I am thankful to say the improvement in my hearing has increased almost daily, and I now hear general conversation easily, and feel quite a different person from what I did a short time since. I am still sensitive to sounds, but not nearly so much distressed with them as I was at first. I found the noise of the organ at church too great the first time I went, and came out almost as soon as the service commenced. I find no pain in my ears, and am in all respects in the enjoyment of good health.'

Deafness of twenty years' duration, perfectly relieved by the artificial membrane.

The following particulars of a case about which we corresponded, were sent to me by Dr. Shearman of Sheffield:

— "I tried the false drum in one ear, the whole of the membrana tympani had been destroyed, and the cavity of the tympanum so bared to the view, that it was difficult at first to ascertain whether the drum membrane had gone, or was obscured by polypoid, or other growths; however, the probe came down upon the bone. The false drum gave such relief, that the hearing distance was increased from actual contact to twelve, and subsequently to eighteen inches; the patient is now able to manage the contrivance herself.

"The other membrana tympani of the same patient is yet so covered with polypous growths, that I cannot make out the precise condition of the drum; however, inflation of the tympanum shows that the membrana tympani is perforated. The deafness in this case is of nearly twenty years' duration, is perfectly removed on the left side, and although the whole of the left membrana tympani is destroyed, the false one acts perfectly."

Reafness from scarlet fever during five years. Hearing entirely restored by the use of the artificial membrane.

Miss G., æt. fourteen, was brought to me in Augu s 1853, by Dr. Grihdrod. Health good . History of case.

When between nine and ten years of age, suffered from scarlet fever, since which time has had a discharge from both ears, attended by a diminuation of the hearing so as to require to be spoken to loud, near to her. lately been to a school at Brussels, where her defective hearing had greatly arrested her progress. Upon inspection, it was found that the membrana tympani in each ear was absent, the mucous membrane of the tympanum was thick and red, and poured out a mucous secretion. artificial membrana tympani was applied to each ear, and the result was so complete a restoration of the hearing power, that the patient could hear all that was said in different parts of a large room. This patient returned to school at Brussels, and in about six weeks afterwards I received a letter from the father, a medical man, from which the following is an extract:- "We have had the most pleasing intelligence from my little daughter at Brussels respecting her hearing. I think I cannot do better than give it in her own words-'I have had three German doctors and one French one to see me, or rather the artificial membranes. I am quite a new creature, my hearing has is so greatly improved.' The father adds-This is very satisfactory evidence as to the successful operation of your beautiful invention, after nearly five years' deafness, to an extent that she was unable to hear a word in church the whole of that time.""

Miss H., æt. seventeen, was brought to me in November, I853, by Mr. Jeffree, of Lambeth. At seven years of age, had a severe attack of scarlet fever, since which time she has had a discharge from each ear, and is so hard of hearing as to require to be spoken to distinctly in a

raised voice within the distance of two yards; she has not been able to hear general conversation. About two years since, a portion of carious bone was removed from the back of each ear.

Upon examination, no membrana tympani was observed in either ear, and the mucous membrane of each tympanic cavity was thick and red. The application of the artificial membrane gave immediate relief, and the patient was soon able to wear it during the whole of the day.

The following is an extract from a letter written by the patient, in February, 1854:—" By the use of the artificial drum, I am happy to say that I am now, and have been since I saw you, perfectly capable of hearing at church, and taking part in conversation, with as much facility as if I had never been deprived of the power."

S. H., Esq., æt. twenty-one, was sent to me by Mr. Fergusson, on December 4th, 1853. Between six and seven years of age, he had an attack of scarlet fever, since which he has had, at intervals, discharge from each ear, attended by so considerable a degree of hardness of hearing, that he is obliged to lean forward whenever he is spoken to, so as to be within a yard of the speaker. Upon examination, the membrana tympani was found to have disappeared from each ear; the watch was not heard by the right ear, and at a distance of five inches from the left. By the aid of the artificial membranes, he was able at once to hear me talk across my room, and he soon heard general conversation perfectly. He went into the coun try, and in the end of January, I had the following confirmation of the persistence of the benefit: " My hearing is quite optional to me; that is, I can hear or not, just as

I choose. The artificial drums I use quite well—can put them in or take them out without assistance. My debt of gratitude to you I can never repay."

Lieut. L., æt. twenty-seven. consulted me on January 1st, 1854. He stated that he had been dull of hearing for fifteen years, especially in the right ear; complains of a singing noise in both ears, but especially in the right. During the last year he has been getting worse, so that he is now inconvenienced in society. On examination, the membrana tympani was found to have disappeared from the right ear, and the mucous membrane of the tympanum was red; the watch was not heard, unless in contact with the ear. In the left ear, the membrana tympani was white, like paper, and at its upper part was a small polypus. Upon the application of the artificial membrane to the right ear, the patient heard well at once, although he never remembers to have heard with it before. He was soon able to put it in for himseif, and to hear admirably well. At the end of February, he thus wrote: -" I yesterday, by accident, lost overboard the artificial membrane, which I have been wearing since I saw you. I find it now rather uncomfortable to leave off wearing it, and I am sure the hearing has been greatly improved, as, although I have had a bad cold lately, I doubt if any one in my new ship has discovered that I am deaf."

Extract from the "Baltimore American."—November 8th, 1856.

EXTRAORDINARY SURGICAL OPERATION.

One of the most delicate and skilful Surgical operations on the Eye was yesterday performed by Dr. Von Moschzisker, assisted by Prof. Monkur and Dr. Baltzell, on a lady in Bond street. The operation was the extirpation of the eyeball, and required both skill and boldness as it was affected by a disease rarely met with, and ventured by but few even of the most skilful ophthalmic Surgeons. The Eye bore a tumor which is known as the fungus hæmatodus, and was about the size of an English walnut, and protuded more than an inch from the orbit. The patient was partially under the influence of chloroform, judiciously administered by Drs. Monkur and Baltzell. The tumor can be seen at the office of Dr. M. by professional men or others interested in this singular form of disease. The patient is doing well, and Dr. Von Moschzisker is entitled to praise for his skill in this operation which was performed in a few seconds.

Extract from the "Washington National Intelligencer." January 13th, 1857.

We have received from Dr. Von Moschzisker a work on the eye and ear, and another on the use and abuse of

spectacles or glasses, or when and why to use them. These works show the great familiarity with the subject possessed by their author, and indicate the principles pursued by him in the treatment of two of the most important organs to human happiness. His ability and success in rendering succor to the afflicted in these ways are testified to in several accompanying testimonials by some of the first physicians in the country and men of the highest standing. Dr. M. treats the eye and ear on a new medical and surgical plan, and what is worthy of note is the fact that in a great number of cases the patient, after a visit or two from the Doctor, can treat his own disease by following certain prescribed directions. Dr. Moschzisker is now making a Southern tour, and will remain in our city but a few days. Those who need his services will therefore do well to embrace the opportunity of paying him a visit. Those who use glasses or believe that they need them will find him supplied with an assortment from which they may select such as will tend to preserve their sight. Dr. M. is at present at the National Hotel.

Extract from the "Charleston Mercury." - February 12th, 1857.

Dr. F. A. Von Moschzisker, a very celebrated Oculist and Aurist, is now in our city. As a writer on the diseases of the eye, ear, and other branches of literature

his name has been familiar to us; but his visit to our city demands that we should make it known to those who require his services, that they can not have a better opportunity than the present of consulting Dr. M. on any disease of the eye or ear. We paid the doctor a friendly visit, and were fully repaid by a sight of his instrument to assist in restoring sight and hearing. Indeed we would have scarcely believed that instruments, such as to enable us to look into the very depth of the eye and ear, could have been arranged, and yet such instruments we have seen and examined; but it is not the instrument that deserves to be praised—it is the physician who knows what use to make of them, and it is only in his hand that they have their full value.

"Hearing," says Dr. M., in his Essay on the Ear "is one of the important functions of the life of relation; its deprivation is to man a source of suffering, and its exercise one of great enjoyment." This we all know, and yet the knowledge of its medical and surgical treatment has been too much neglected by medical men; and, therefore, the belief, that diseases of the ear, producing deafness, could seldom or never be cured. But, it is now very evident that if these diseases are properly treated, they yield as easily as those of other organs. He goes on to prove it by numerous cases, of years and years standing; and he mentions one case where the patient had been sent to him by Professor Monkur, of Baltimore, where Dr. M. has resided for the last five years. Dr. Monkur says in his letter: "Mr. Anderson has been deaf for many years. He has been under the

treatment of several physicians, and his deafness seems to increase. I have advised him to put himself under your treatment, believing that, if you cannot restore his hearing, it will not be done by any of the profession. The Doctor then states the case of Mr. A., who has been fully restored. We have not space to day, fully to review Dr. M.'s works, and particularly the one on glasses, which clearly shows that glasses should only be purchased of one who understands the eye, and all its changes. But we refer our readers to Dr. M.'s card.

Extract from the "Evening News," Charleston.— February 12th, 1857.

DR. VON MOSCHZISKER.

A visit to a Doctor's office is not always a pleasant pastime; but we must say that we never felt more gratified with any half hour we have passed for a long time than the one we spent with Dr. Von Moschzisker, the Oculist and Aurist, now in our city. The Doctor, as we have already made mention, is a scientific and literary man, and perfect master of his profession. He has laboured for years, and owing to his present state of health, he will pass a few months in our Southern cities, and now we would mention what we saw. We will begin with the artificial things—a most beautiful collection

of artificial Eyes, which certainly look very naturaland the Doctor assures us are inserted without causing any pain, and are so perfect, that not only the casual observer, but even the professional man often cannot detect them-the Artificial Ear, or the self-supporting Sound Conveyor, an instrument improved by Dr. M. himself, which is invaluable to those whose deafness is beyond the reach of medical skill. It conveys sound accurately to the ear, and can be worn without the slightest inconvenience. Of his instruments, we will name the Ear Illuminator and Opthalmascope, instruments by which the Oculist is able to look into the depth of the eye and ear and detect the slightest ailments of these organs. The Optamator measures the exact focus of the eye; and spectacles purchased of Dr. M., who by the by has the very finest assortment of Chevalier's Pantascopic Glasses, which are the most useful ones that have yet been invented, are sure to suit the exact focus of the eye, and not injure the sight. Dr. M. has indeed every thing that science has brought to light, and is fully capable of restoring vision and hearing, and to investigate the diseases those organs are subject to .- Let those who are in need of an Oculist and Aurist, who wish to have an eye inserted or are in want of glasses, profit by the Doctor's visit to our city. We would further mention that we have heard several physicians of high standing speak most flatteringly of the Doctor's work on the eye and ear, and they, too, were perfectly delighted with their visit to him.

Extract from the "Savannah Republican."—March 19th, 1857.

In nothing is the progress of science more strikingly illustrated than in the instruments now in use by the medical profession, for the purpose of ascertaining and relieving the injuries and diseases to which the human body, in its various parts, is subject This idea forcibly occured to us a day or two since in looking over the ingenious instruments on the table of Dr. Moschzisker, oculist and aurist, now on a visit to our city. Among them we may enumerate the "Opthalmascope," which enables the occulist to pry into the depths of the eye, and ascertain the exact condition of the retina, optic nerve, &c. Another is called the "Optometer," an instrument by which the focus of the eye is accurately measured and spectacles suited to the exact focus, so that we can rely that our glasses will not ruin our eyes, but are just what we want. One of the most curious and wonderful, however, is an "Ear Speculum," the invention of a celebrated German surgeon, which, by means of a reflected light, illuminates the whole interior of the ear, and brings directly in view those hitherto hidden portions of the auditory apparatus that are so often the seat of disease.

These instruments, with a variety of others, works of modern invention, are in daily use by the Dr., and we learn, with most beneficent and satisfactory results. A number of cases, of long standing, have been treated successfully we learn, since his arrival in Savannah. For

the benefit of those who are afflicted in that valuable organ, the ear, several letters are appended from gentleman of character and respectability, residing in various parts of the union.

Extract from the "Augusta Chronicle."

THE EYE AND EAR.

It is not to be supposed that the general practitioner, however high in his profession, can be perfect in all bran ches of Medical Science. In this country but few eminent men have paid special attention to the diseases of the eye and ear. This is particularly true of the latter organ, and we are not surprised to learn that deafness is much more common in the United States than on the Continent. Throughout Europe the medical profession is divided into specialities, each practitioner perfecting himself in some one branch. Persons suffering from diseases either of the eye or ear apply to one who has made these organs his study and is prepared to treat them scientificially and understandingly. Hundreds of persons, in this country, are now suffering from deafness and blindness, in consequence, either of improper treatment or a total neglect of any sort of treatment. Some of these cases have gone so far as to be past treatment, but others may yet be reached by proper and immediate attention. Persons suffering from diseases of either of those organ should not fail to call on Dr.

von Moschzisker, who is stopping, for a short time, at the Augusta Hotel, where he may be consulted. He comes with numerous recommendations from the first physicians of Baltimore, Charleston and Savannah. In all of these cities his success has been most wonderful—as can be attested by letters in his possession and editorial notices. We confidently recommend him as a gentleman of fine literary and scientific acquirements and a perfect master of his profession.

Extract from the "Macon Telegraph," Georgia.

We cheerfully endorse the following—There are very few men in the United States who have had the opportunity to become so thoroughly versed as Dr M. in his particular Department:

Mr. Editor:—Dr. von Moschzisker informs me that he contemplates leaving Macon next Saturday, for Montgomery. Now I would urge all those persons afflicted with deafness, to call on him at once, as it is seldom they have such an opportunity of knowing with certainty the cause that produces their affliction, and if it can be removed the Doctor can do it, if not, he will say so, and save trouble and expense.

By a few moments accurate examination with his very complete Instruments, he will tell the facts of the case. I would state in the numerous cases under treatment

here, they differ in their cause for the same effect, which will at once show the folly of depending on Oils, Nostrums, &c. "for the cure of deafness," and the absolute necessity of proper examination before treatment, and the great skill with experience, required by a successful professional Aurist. From Dr. von Moschzisker's treatment of my case and witnessing his operations on others, I sincerely believe he is eminently qualified and justly entitled to the utmost confidence.

This communication is unsolicited by Dr. M., and the only motive of the writer (who is known to the Editor) is disinterested benevolence, and an act of justice to a gentleman and man of science.

Macon, April 20th.

THE EYE AND EAR.

Deafness and all diseases of the Eye and Ear.

PANTASCOPIC GLASSES.

DR. F. A. VON MOSCHZISKER, Oculist and Aurist, author of several works on the diseases of the Eve and Ear, and one on Glasses, why and when to use them, can be consulted, for a short time, on all Diseases of the Eve and Ear, which require either Medical or Surgical treatment. Dr. M's success in the treatment of these organs,

both in Baltimore—where he resided for the last five years—and in Charleston and Savannah, has been of the highest satisfaction both to him and to his patrons; and for the satisfaction of those who may suffer from any malady either of the Eve or Ear, Dr. M. begs to lay before the public a few extracts from letters of some of the first Physicians in the country, and private individuals of the highest standing in society.

From Solomon Cohen, Postmaster, Savannah.

DR. VON MOSCHISKER—Dear Sir; Having been under your medical treatment for an abcess in each Ear, I would express to you my entire satisfaction with your management of the case. Your remedies were all beneficial, and your manipulations and examinations of the Ear were always done gently and to my comfort.

Respectfully, &c.

SOLOMON COHEN.

Savannah, Ga., 26th March, 1857.

From R. Erwin, Esq., Commission Merchant.

SAVANNAH, March 17th, 1857.

DR. F. A. von Moschzisker, Pavilion Hotel—Dear Sir: It is with no ordinary feeling of gratitude that I now inform you of the entire restoration of my hearing. For four years I was partially deprived of the use of that important organ, and have suffered therefrom incon-

veniences to which those who are blessed with healthy Ears are perfect strangers. I was induced to place myself under treatment from the many testimonials which you brought with you from Baltimore, Charleston and other places, and I am constrained, in justice to you, to say that they are by no means too flattering. You have done all for me you promised to do since the first examination. You have entirely relieved me of almost total deafness, and I can hear as distinctly with the one you have operated upon as I ever could with the healthy ear.

I take great pleasure, therefore, in recommending you to all those who are similarly afflicted. Those who do not embrace the opportunity of consulting you, will be doing themselves great injustice. You can make use of this letter in any manner which may be of benefit to you.

Very respectfully, yours,
ROBERT ERWIN.

From Professor Jackson, Philadelphia.

"I doubt not, after your well deserved reputation has once been established, you will meet with all the encouragement our people are ready to give to a man of science. I truly trust you will succeed in rescuing the treatment of the Eye and Ear from the hands of the empiric and pretenders who have destroyed public confidence in the ability of restoring hearing. I thank you, for my own part, for the good service you have done to our profession by your valuable productions."

From Professor Monkur, Baltimore.

"I have this day seen Miss Wise, her sight perfectly recovered. I am happy to express my conviction that by your skill and judgment she has been saved from the greatest deprivation that could have befallen her."

From Dr. Winchester, Baltimore.

"Mr. Anderson's hearing still continues well. I feel the more interested in the case, for I advised him to put himself under your treatment, feeling satisfied if you cannot restore his hearing it will not be done by any of the profession."

From Professor Dickson, Charleston.

"Your Optometer offers to every one the striking advantage of measuring with exactness, both the degree of defect of vision under which he suffers, and the availability of the remedial appliances adapted to relieve him."

From Dr. E. Horlbeck, Charleston.

"I consider the use of your Optometer a great advantage, and much superior to the imperfect method hitherto in use."

Dr. M. has the finest assortment of the very best GLASSES, which are warranted to suit the exact focus of

the Eye, after accurate examination has been made of both eyes by the Optometer.

ARTIFICIAL Eyes inserted without causing any pain.

TRUE SIGHT.

Those who value sight, and wish to feel certain that they have Glasses which are to the exact focus of their Eyes, should purchase them of Dr. von Moschzisker, Oculist. His method of suiting the Eyes is on the most scientific principles, and has received the highest praise from the entire Faculty. The adaption of optical contrivance to amend disordered vision is one of the most exalted applications of high abstract knowledge for the relief of the infirmities of man, caused by the use of Glasses selected by the cupidity or ignorance of men who call themselves Opticians, but are nothing more than spectacle sellers. Dr. M's reputation as an Oculist is well known-he can refer to the entire Medical Profession-and feeling the great importance of selecting Glasses for people, and not let them be their own choosers, or root out those who underake the task without the slightest knowledge, will supply all who actually want Glasses, with those they should have, and no others. Dr. M. is the author of a work called the "Use and Abuse of Glasses." We beg to subjoin two letters from two of the first Physicians of Charleston, S. C.:

FEBRUARY 19, 1857.

DEAR SIR:—I have made fair trial of the glasses, which you courteously placed in my hands, and am greatly pleased with them. They properly deserve all the high praise they have received. In form, lightness, transparency and power, they equal or excel any I have ever seen.

Very respectfully, and with the best wishes, I remain your obedient servant.

SAMUEL HENRY DICKSON.

Dr. F. A. von Moschzisker.

FEBRUARY 19, 1857.

DEAR SIR:—I am pleased at having the occasion of expressing my approbation of the Glasses, which you were kind enough to furnish me with, some days since. They are exceedingly well suited to my eyes, and, by their assistance I read with more facility, particularly at night, than I have done with other glasses, that I have tried.

I consider the use of your optometer, in supplying exactly the power needed, a great advantage to those who require the assistance of glasses, and much superior to the imperfect method hitherto in use.

Yours, etc.,

ELIAS HORLBECK,

DR. F. A VON MOSCHZISKER.

Extract of a letter from J. E. CAREW, Sheriff of Charleston District:—

Reading at night, which had become irksome and indeed almost painful is now made easy and pleasant. The Glasses fulfil, in all respects, your highest recommendation.

J. E. CAREW.

Dr. M. has the highest references, both as regards his professional treatment as well as his Glasses.

Mr. M. Giese, a schoolmaster, exposed himself to cold after a bath. A few days after he complained of singing in the right Ear, and of deafness in both together, so that he could scarcely hear my watch, and was unable to attend to his duty. He recovered his hearing perfectly after six weeks treatment.

Mr. Henry Buss, of very healthy, robust constitution, had suffered since he was four years old, after an acute cutaneous eruption of uncertain character, from a dark red excoriated swelling of the walls of the meatus of each Ear; he was very deaf when he put himself under my treatment. He was discharged partially cured after two months treatment; he continued the treatment prescribed for him, and recovered his hearing perfectly after six months.

Dr. von M., could refer to numerous other cases, some of as long as twenty years standing. Dr. M., begs to lay before those who suffer from any diseases either of the Eye or Ear, some of his letters which he received from persons of the highest standing, when he visited the South. Dr. M.work s on the Eye and Ear are well known to the Profession, and have been introduced as the best text book on the department of which they treat, by several Medical schools.

