A

CLINICAL REPORT

OF THE

ROYAL DISPENSARY

FOR

DISEASES OF THE EAR.

WITH

REMARKS

ON THE

OBJECTS AND UTILITY OF THE INSTITUTION.

BY JOHN HARRISON CURTIS, Esq.

SURGEON AURIST TO HIS MAJESTY, AND THEIR ROYAL HIGHNESSES THE DUKE AND DUCHESS OF GLOUCESTER; SURGEON TO THE ROYAL DISPENSARY FOR DISEASES OF THE EAR; LECTURER ON THE ANATOMY, PHYSIOLOGY, AND PATHOLOGY OF THE EAR; AUTHOR OF A TREATISE ON THE TREATMENT OF DISEASES OF THE EAR; FELLOW OF THE MEDICAL AND MEDICO-BOTANICAL SOCIETIES OF LONDON; MEMBER OF THE ZOOLOGICAL SOCIETY OF LONDON; AND OF THE PHILOSOPHICAL SOCIETY OF LEIPSIC, &c. &c.

LONDON:

PRINTED FOR THE INSTITUTION,

AND SOLD BY

T. AND G. UNDERWOOD, FLEET-STREET.

1827.

LONDON:
PRINTED BY THOMAS DAVISON, WHITEFRIARS.

Royal Dispensary

FOR DISEASES OF THE EAR,

FOR THE RELIEF OF THE POOR,

10, DEAN STREET, SOHO SQUARE.

Patrons.

THE KING'S MOST GRACIOUS MAJESTY,

AND

HIS ROYAL HIGHNESS THE DUKE OF CUMBERLAND.

President.

THE MOST NOBLE MARQUESS CAMDEN, K. G.

Vice-Presidents.

HIS GRACE THE DUKE OF NORFOLK.
HIS GRACE THE DUKE OF NORTHUMBERLAND
HIS GRACE THE DUKE OF DEVONSHIRE.
HIS GRACE THE DUKE OF RUTLAND.
THE MOST NOBLE THE MARQUESS OF ANGLESEY.
THE MOST NOBLE THE MARQUESS OF AYLESBURY.
THE RIGHT HON. THE EARL OF EGREMONT.
THE RIGHT HON. EARL FITZWILLIAM.
THE RIGHT HON. THE EARL OF HAREWOOD.
THE RIGHT HON. THE EARL OF LONSDALE.
THE RIGHT HON. EARL SPENCER.
THE RIGHT HON. THE EARL OF HARDWICKE.
THE RIGHT HON. THE EARL OF CLARENDON.
THE RIGHT HON. THE EARL OF PEMBROKE.
THE RIGHT HON. THE EARL OF DARLINGTON.
THE RIGHT HON. VISCOUNT DUDLEY AND WARD.
THE RIGHT HON. VISCOUNT SIDNEY.
THE RIGHT HON. VISCOUNT BELGRAVE.
THE RIGHT HON. LORD SOMERVILLE.
THE RIGHT HON. LORD BEXLEY.
THE RIGHT HON. GEORGE CANNING.
THE RIGHT REV. THE BISHOP OF BATH AND WELLS.
SIR JAMES LANGHAM, BART.
SIR ROBERT T. FARQUHAR, BART.
SIR SAMUEL SHEPHERD.
GEORGE WATSON TAYLOR, ESQ. M.P.

WILBRAHAM EGERTON, ESQ. M.P.
DAVIES DAVENPORT, ESQ. M.P.
FRANCIS LAWLEY, ESQ. M.P.
ALEXANDER BARING, ESQ. M.P.
SAMUEL SMITH, ESQ. M.P.
GEORGE HALDIMAND, ESQ. M.P.
WILLIAM BABINGTON, M.D. F.R.S.
LEWIS LEESE, ESQ.
ROBERT BARCLAY, ESQ.
GEORGE HAMMERSLEY, ESQ.

Consulting Physician.

JOHN SIMS, M.D. F.R.S.

Surgeon.

JOHN HARRISON CURTIS, Esq.

Treasurer.

WILLIAM COBBE, Esq.

Secretary.

GEORGE WHITING, Esq.

Collector.

Mr. DAVIES.

The benevolent Views of the Charity are not confined to the Inhabitants of the Metropolis, but extend to every Individual.

Every Subscriber of One Guinea *per Annum* is entitled to One Patient always on the Books; Two Guineas entitles to Two Patients, and so on in proportion: Ten Guineas constitute a Life Governor. Such Patients as require it are gratuitously supplied with improved Acoustic Instruments for assisting Hearing.

Subscriptions are received at the Banking House of Sir William Curtis, Bart. and Co. Lombard Street; Messrs. Barclay and Co. Lombard Street; Messrs. Hammersley, Pall Mall; W. Cobbe, Esq. No. 31, Regent Street, Piccadilly; and by J. H. Curtis, Esq. Surgeon to the Institution, No. 2, Soho Square.

A REPORT,

&c.

THE ROYAL DISPENSARY FOR DISEASES OF THE EAR was instituted in December, 1816, under the patronage of his present MAJESTY, of his royal brothers the late lamented DUKES OF YORK and KENT, of his Royal Highness the DUKE OF CUMBERLAND, and of many individuals of the highest rank in the state and eminence as men of science, as well as a numerous body of professional persons of great celebrity: amongst the latter may be mentioned Dr. Sims, Dr. Babington, Sir Astley Cooper, Mr. Leese, and the late Sir Walter Farquhar, Dr. Baillie, and Mr. Cline. Its prominent object was the relief of the industrious poor from a class of diseases to the last degree painful and inconvenient,

and often neglected, if not indeed generally misunderstood, on the part of those to whose management the ailments of the lower orders are commonly consigned. This remark is introduced without the slightest intention of advancing any charge as to dereliction of duty against a body conspicuous for their humanity and self-devotedness to the claims of the indigent and the suffering poor. But nothing is more true than that the relief of the parties in question, in the respect now specified, was for a long period completely overlooked. Public sympathy was excited and kept alive by a host of other and not less interesting claims, while these were forgotten. When, however, a voice was raised in their behalf, it is gratifying to record that a ready ear was lent to the suggestion. Mechanics, domestic servants, soldiers, sailors, and foreigners, with their families, and indeed the distressed at large, of whatever name or description, were encouraged to repair to this quarter for relief.

The charity has now stood the test of ten years' active operation; a period more than

sufficient to prove the pretensions, the stability, and the efficacy of any institution of this nature. During that period it has been found of such unquestionable utility, that it has met with support fully answering to the demands that have been made in its behalf. Its efficiency has now, however, reached such a state of augmentation, that increased means of support are indispensable to extend its sphere of usefulness. The object of the present statement is, by a simple representation of facts, to show the increase of its utility, and for the information of those who have been its friends, and who have liberally contributed to its establishment and prosperity. The Royal Dispensary was not indeed the first institution for the treatment of diseases of the ear which was attempted in London, and when the measure of its establishment was first undertaken, apprehensions were entertained as to its durability, more on account of the failure of a similar one than from doubts as to the necessity and propriety of the measure itself.

The charity alluded to was set on foot

at the instance of the late Mr. Saunders, who was, in this country, the father of acoustic surgery: a branch of professional study that had, till his time, been miserably neglected.

Diseases of the organ of hearing are comparatively few, if we consider the vast number of maladies to which the human frame at large is exposed, and, if not entirely overlooked, were blended in the great mass of nosological arrangements, while in the wide range of general practice they were too often considered as incidental objects, and their treatment confided to ignorant and empirical hands. The mere circumstance of rescuing the poorer and less intelligent classes of the community from the rapacious and unprincipled interference of persons of this description would of itself have been a beneficial and meritorious design, had it not been accompanied with those further advantages and facilities which will be hereafter described.

With regard to Mr. Saunders, it may be proper to add, that his scientific and ingenious endeavours to draw attention to the study and practice of Acoustic Surgery were

met with such inadequate encouragement that he shortly found it expedient to relinquish this branch for the more lucrative department of the Oculist. Acoustic Surgery seemed now again to be abandoned, and the necessitous poor to be again left to their fate. From this, however, they have been so far rescued by the establishment of the present charity, which has been kept up upon a liberal and extensive scale, and now forms a school of instruction to the junior practitioner for this class of diseases.

The attempt of establishing it was no sooner made, however, than an opposition was directed against it by those most interested in its failure. If misrepresentation and calumny could have effected its ruin, it would long since have been consigned to oblivion; but its merits were too manifest, and its supporters too judicious and clear-sighted, too zealous and liberal in the cause of benevolence, to abandon their intention, and the work of their charitable purpose, merely because it was ill spoken of, and viewed with jealousy and dislike by those whose injurious proceedings it was expressly intended to coun-

teract. Indeed, some of the most strenuous supporters of the present institution have been those who took the deepest interest in the former establishment; the failure of which is therefore to be ascribed to any thing rather than disapproval of, or dissatisfaction with, its object. This opposition has at length subsided; and the beneficial influence of the institution, besides having been felt in the metropolis, has been diffused throughout the country. Not only have applications for relief been received and attended to from all parts of the kingdom, but the attention of professional men has been attracted to the nature and treatment of these particular maladies, by which a greater degree of intelligence and success has attended the exertions that have been generally made for the relief of sufferers of this description. It may be added, that there were not wanting, in the first instance, those who doubted the success of the measure, and who consequently refrained for a time from giving that support which a subsequent conviction of its utility led them most cordially to afford. Among these, indeed, are to be reckoned some of its warmest and

most active friends; nor is it too much to hope, from a view of the annexed abstract, which will show the progress and efficacy of the Institution from the year 1817 to 1827, whereby the steadily increasing usefulness and importance of the Dispensary will be demonstrated at one view, that their numbers have been progressively augmented.

Year.	Number of Patients admitted.	Number cured.	Number relieved.
1817	367	89	75
1818	412	141	109
1819	525	176	152
1820	559	201	174
1821	694	219	201
1822	729	280	230
1823	710	236	218
1824	733	311	223
1825	741	340	237
1826	860	473	205
Total	6330	2466	1824

In the estimation of intelligent and enlightened foreigners, the greatest beauty of this country, and, in particular, of its magnificent metropolis, is the multiplicity and variety of its benevolent institutions. It may now be said, and said truly, that there is not "an ill which flesh is heir to"—that there is hardly any species of calamity that can assail animated nature *—for which relief, if not remedy, has not been provided; and that upon a scale of liberality unprecedented and totally unrivalled. It is not intended to detract from the claims of other countries, in some of which are to be encountered institutions of the most praiseworthy and perhaps sometimes singular description. But of most of these it may be said, that they owe their existence to some deplorable necessity, experienced in a general manner, or to some for-

* Although the institutions for the promotion of veterinary science, contemplating the relief of various species of the lower animals, and certain other undertakings for the diminution of *brute* suffering, do not admit of classification with *Infirmaries*, *Dispensaries*, &c. they spring from kindred sources, and owe their origin to a benevolent feeling.

tuitous circumstance, rather than an abstract contemplation of the wants and necessities of the poorer orders in society, on the part of that portion of the community at large who are, if not exempt from participation in these distresses, able to furnish themselves with the best means of solace and relief. It may be observed further, that the operation of many of these institutions is contracted, and that the sum total of relief falls infinitely short of that which characterises the charitable institutions of Great Britain—institutions, by the way, which depend more upon the continued and unwearied contributions and exertions of private and living individuals, than upon the testamentary dispositions of the dead, and their endowments of property for which they have no use, and which we have sometimes the mortification of seeing rendered unavailing by a want of practical attention to the exigencies they might in some other manner be better calculated to relieve. This last remark, however, leads to the recollection that charities which are not endowed with property, and have no

permanent fund, must of necessity expire; dying, as it were, a natural death, if not actively and unremittingly supported by personal assiduity, as well as pecuniary contributions.

With regard to the institution now more immediately under consideration, (which happens to be one of those dependent on the unremitting support of the living, rather than the munificent legacies of the deceased, and the whole of whose property, arising from annual subscriptions and occasional contributions, is, from year to year, applied to the purpose of its establishment,) there can be little hesitation in asserting, that it does not fall short of others in its claims on public attention and patronage. There is no object more universally at heart, among the innumerable plans for the reduction of human misery, than the alleviation of bodily pain, and the removal of disease; and there are few bodily ailments that inflict more intense suffering, cause greater inconvenience, or are less understood and attended to, than diseases of the ear. No rank in society is exempt

from their attacks, and the most common, the most lamented (though often the most disregarded of all their consequences), is, upon the whole, the most serious, viz. deafness. In itself, however, it is frequently a very simple complaint, and easily removed, if the cause be accurately ascertained, and the treatment proper and judicious.

Deafness is universally spoken of as a defect; and is often one of the most serious description. It is extremely prevalent among persons engaged in domestic occupations, and when it exists in a member of a family, or domestic establishment, however humble or subordinate, creates much inconvenience. There are many situations too in life, for which it utterly disqualifies the subject labouring under it. Who, for example, would choose to consult a deaf surgeon, or employ a deaf physician; hire even a deaf servant, or enlist a deaf man for a soldier? In fact, there are very few occupations of an active or social description, for which a person who has lost the faculty of hearing can possibly be considered fit.

It was to obviate this evil, from its great

prevalence among the poor, that our institution was set on foot. In the administration of its benefits, every aid is granted of which the malady is susceptible; and where the ailment cannot be altogether removed, relief is often afforded; while the incurable patient is supplied with such artificial helps as experience has shown to be most beneficial in similar cases; or, at least, the best calculated to enable the sufferer to bear up under his affliction, and to be still an useful, a valuable, and possibly even an active member of society.

One of the objects proposed in this report is, to show that diseases of the ear, like diseases of other organs, if properly studied and judiciously treated, are by no means of so incurable or unmanageable a nature, as it has been too much the custom to suppose—an opinion, the prevalence of which has been productive of considerable mischief. The derangements incident to the organ of hearing are always troublesome, and often impair the general health; although the sufferer is apt to pay little attention to his own infirmity, and to postpone, or neglect, any application for effectual relief.

Such ailments are very apt also to be overlooked by others, who in the case of general sickness would be easily enough alarmed, and sufficiently prompt in seeking or affording the necessary assistance. Thus it not unfrequently happens, that before any complaint is made, or the presence of mischief suspected, the evil is beyond remedy, and the sufferer permanently injured. But, perhaps, it will be better to introduce a few observations on certain particular diseases to which the ear is exposed, than to advocate the cause of the institution for their removal, by the continuation of general remarks.

Of all these disorders the most prevalent among our applicants consists in a purulent discharge from the ear, called by nosologists Otorrhœa. It is generally brought on by exposure to cold, is not unfrequently the consequence of an attack of fever, and, although it is often both a serious and disagreeable complaint, if attended to in time it is very easily cured. I may remark, however, that there are three distinct stages of this complaint: the first being simply a discharge from the ear, disagreeable and inconvenient, though

unaccompanied with any thing of an alarming nature; in the second form the discharge is combined with fungus or polypus; and in the third the bones are involved, becoming carious, and the disease often terminating in death.

The first form of the disease generally yields to simple remedies, but when long continued, and degenerating into what is termed the chronic state, there may be some danger from checking it too suddenly. Even in the second form, after the removal of a fungous or polypus excrescence by manual interference, or local remedies adapted to the nature of the case, the application of mild and cautious means have generally been found, in my experience, to be sufficient for its removal. But the third stage is more formidable; and M. Lallemand (a celebrated professor of Montpellier) has given an alarming picture of the danger accompanying it. However benign a discharge may be in the first instance, it has been observed by this author, that if neglected, or improperly treated, it proceeds from a mucous to a purulent form, accompanied by that distinctive fetor which marks the destruction

of the bones. Several fatal cases are adduced by this gentleman, showing the importance and necessity of early attention, as well as the danger of improper treatment.

I shall subjoin an example or two of the benefit that has been derived by persons labouring under otorrhœa, from attendance at the Royal Dispensary.

Case I. Frederick Pearce, aged thirty-two, a servant, had been unable to follow his business for upwards of three years, on account of a puriform discharge from the tympanum. He was admitted to the Dispensary on the 1st of September, 1826, labouring under very great deafness, accompanied by a profuse fetid discharge; but by regular attention to the instructions he there received, and following them up by a corresponding system of management, he was dismissed, perfectly cured, on the 8th of December following.

Case II. Lucy Myers, aged fifty-four, was admitted on the 23d June, 1826, labouring under extreme deafness, with a polypus in each ear, from which there was a continual discharge of pus tinged with blood. The polypus in the right ear I removed by a

ligature; that in the left ear was deeper seated, and being beyond the reach of the same application, I found it necessary to use the forceps. This instrument was successfully applied; and after the excrescences were removed, and the means usually resorted to in similar cases had been fairly tried, this patient perfectly recovered.

Otitis may next be mentioned as one of the most common complaints among our patients. It is an inflammatory affection, of an exceedingly painful nature, and in common language is termed the *ear-ache.* Children are frequently the subjects of this disorder, but most commonly it attacks those who labour much in the open air. Like other inflammatory diseases, it assumes two forms or varieties, the acute and chronic; and is susceptible of those applications and modes of treatment which are employed under analogous circumstances. The acute form is easily relieved by reducing the local inflammation and increasing the action of the *primæ viæ;* but in the chronic form the cure will of course be comparatively tedious, though in these cases the disease will

yield to appropriate constitutional treatment. The following instances, selected from the registers of the Dispensary, will throw further light on the subject.

Case III. Samuel Mortimer, aged 24, was admitted a patient, having caught a severe cold by travelling during the night on the outside of a Bath coach. Soon after this he was seized with most excruciating pain in the ear, which rendered him at times insensible, and exhibited all the characteristics of acute Otitis. From the severity of the disorder he was thrown out of employment, but by the use of active means for the reduction of the inflammation, he was soon enabled to return to his proper business.

Case IV. Mary Wilson, aged 41, a domestic servant, had lost her place through a chronic inflammation of the ear. This woman had been subject to severe tooth-ache, which terminated in the disorder now mentioned.—The pain in the ear continued, without intermission, even after the extraction of the carious teeth; and was so severe as to affect the head, threatening inflammation of the brain and its membranes. Of course, while

labouring under this severe affliction she lost her place, and was out of employment for eighteen months. Proper treatment removed her ailments. She is now quite well, again employed in a comfortable situation, and truly grateful for the benefits she has received at the Dispensary.

A third and a very common disease may be described as an herpetic eruption appearing chiefly on the external part of the ear, but not unfrequently involving the passage. It causes a thickening of the skin, and sometimes even a discharge from the meatus; the thickening occasionally closes the passage and brings on deafness. The disease is very frequent among children, and among them is common at a very early period of life. Sometimes, however, we meet with it in grown up people, and it prevails among those of a scrofulous habit. In such cases, along with appropriate local treatment, it is necessary to attend to the constitution, and to correct its depraved state by means of alteratives. Its duration is much influenced by the state of the general health; and, upon the whole, it

may be considered rather as a troublesome than a dangerous affection.

Case V. Elizabeth Lloyd, aged 54, had been afflicted for six years with an herpetic eruption, accompanied by great enlargement of the outer ear, profuse discharge from the meatus, and considerable erysipelatous inflammation of the surrounding parts. This being evidently a constitutional complaint, an alterative plan of treatment was adopted, and in a short time she was discharged perfectly cured.

Case VI. Philip Walters, whose case was so far similar to the former, as regarded the herpetic eruption, and was equally severe. A like plan was pursued, and the result was equally successful.

All classes of society are exposed to a fourth disorder of the ear (which I have found to be particularly prevalent among females), and which may be denominated nervous deafness. This complaint assumes a variety of appearances, and is of daily occurrence in every shape at the Dispensary; and although perhaps one of the most troublesome

affections to which the organ is exposed, if attended to in time and properly managed, it is not very difficult of cure. When of long standing, however, and when the ear has become habituated to mistaken impressions and false perceptions of sound, it proves exceedingly obstinate. But even in these cases much may be accomplished by perseverance, on the part both of the patient and the practitioner.

I have found, upon careful inquiry, that, except in a very few cases, nothing whatever has been attempted in the way of relief; while a great proportion of those who have applied to, and received advice from, medical practitioners, have not followed their instructions. It not unfrequently happens, also, that the plan of treatment resorted to is far from being calculated to produce the desired effect. Persons not dependent on their labour for support are prone to neglect this affection ; but in other instances my instructions are cheerfully attended to, and the relief that follows is received with great thankfulness. It may be added, that upwards of two hundred persons out of employ have sought relief

under this malady, who are now either cured, or whose situation is at least so far improved as to admit of their returning to their usual avocations.

The disease may be looked upon as a modification of a general constitutional disorder, in which the nervous system at large being affected, the influence is felt or manifested in a peculiar manner in the organ of hearing. To change this constitutional affection is therefore the principal object to be kept in view, and the state of the digestive organs I have found a prominent point for consideration and management. The local affection being generally unaccompanied with pain, and the inconvenience suffered by the patient not being extreme, especially while the malady is confined to one ear, the party seldom complains, and the disorder being neglected, gains ground, and augments to a pitch that sets relief at defiance.

The complaint springs from such a variety of causes, that a proper course of treatment cannot be adopted until after minute inquiry into the circumstances of each individual case. Fixed principles and established modes

are here out of the question. Nervous deafness is sometimes a most alarming occurrence; for, when attended with noise in the ears, technically called *tinnitus aurium*, it is often indicative either of apoplexy, or some other morbid affection of the brain, from which there is always the greatest danger of a fatal termination. In cases of this important and formidable description it would be unnecessary to point out the extreme hazard of neglect, or of improper management; but it may with great propriety be noticed, that much may depend on an accurate diagnosis, or discrimination of the real state of the case; by which principally we may expect to avoid the risk of applying inefficient or injurious means, and also obviate the loss of time, which in urgent cases of this nature is more valuable than in many others.

Case VII. David Richardson, aged 45, had been a servant in a gentleman's family, but had been compelled to relinquish his situation on account of this complaint—nervous deafness. He was affected with noise in the ears, diminished secretion, depression of spirits (amounting at times to profound melan-

choly), loss of appetite, and general derangement of the digestive organs. He submitted for some time, with great patience, to a rigorous plan of treatment, but without effect; but by perseverance and augmented energy in the applications he experienced a complete cure, and was enabled to thank his benefactor for restoration to health and employment.

Case VIII. Frances Wilmot, a poor married woman with five children, had been subject to nervous deafness from the age of nineteen, accompanied by head-ache, dyspepsia, and occasional hysteria. At the recommendation of a nobleman, she was admitted a patient, at a time when she was completely prevented by this accumulation of complaints from attending to the concerns of her family, whereby she was the innocent cause of much distress to her husband. By attendance at the Dispensary, however, for a few months, she was completely relieved, and enabled to resume her usual activity.

Case IX. William Farrel, aged 24, a servant in a public office, laboured under all the symptoms of nervous deafness already

described. This patient had observed that his hearing was better in proportion as the noise and bustle of the office were increased. He recovered in six weeks.

The external parts of the body, besides their liability to diseases, and corresponding derangements in common with other parts, are peculiarly exposed to accidents; and it would be singular were the ear alone exempted from these. It has, indeed, besides its full share of casualties in general, some to which it is peculiarly liable, from its form, structure, and situation. Several cases have presented themselves in which children while at play have had pins, cherry-stones, and other small extraneous substances introduced into the passage, giving rise to considerable inflammation, and causing very great pain until they were removed. In cases of this sort the suffering has been sometimes so great as to occasion delirium. Insects also occasionally find their way into the ear, and by doing so may produce great uneasiness, though this is not so frequent an occurrence (at least as regards their penetration to the inner passage) as may be commonly imagined. But as they

may be unable to extricate themselves when once involved in the exterior meatus, the inconvenience thereby occasioned may be considerable, and the irritation of a foreign body will always give rise to more or less derangement and uneasiness.

Case X. Thomas Maynard, a little boy, was sent to the Dispensary on account of a piece of slate-pencil having been accidentally forced into the ear. The consequent pain was very acute, and it was attended with great swelling of the parts. With some difficulty the exciting cause was removed by the forceps, upon which the symptoms subsided.

Case XI. John Morgan, a carpenter, aged 63, was recommended in consequence of having received a violent blow from the falling of some timber. The concussion was considerable; and when taken up he was insensible, while blood was copiously discharged from the ear. He was unable to follow his employment for six months, but recovered under the treatment pursued at the Dispensary in a few weeks.

Deafness sometimes arises from a very simple cause, which being frequently overlooked, the case becomes protracted, and sometimes causes alarm. I allude to the accumulation of inspissated or hardened cerumen. Cases often present themselves at the Dispensary in which the deafness has been long continued, and considered as a permanent complaint; whereas the whole affair consists in nothing more than what has been now mentioned. The accumulation takes place at the inner extremity of the meatus, and occurs at every age, frequently from the most trivial causes. The state of the secretion, at the same time, undergoes a considerable change; and the case is not unfrequently confounded with nervous deafness, and other affections of the auditory organ.

In every part of the body whence a secretion or excretory matter is expelled, there is a muscle for the performance of this function, the most familiar examples of which we have in the sphincters; and sometimes the apparatus for this purpose is combined, if not even complicated. But with regard to the

ceruminous secretion from the ear, physiologists have supposed that it is propelled in the healthy state by the action of mastication; while in the unhealthy state (a state which refers rather to the secretion itself than to the organs) artificial interference is required for its removal. Be this as it may, cases of the nature in question require that the ear should be inspected, by which we shall often detect the cause of the inconvenience with great readiness. Having done this, relief may be almost as readily afforded, and the hearing at once restored. In this way people occasionally labour under deafness for a considerable time, with the notion that they are the subjects of an incurable infirmity—never imagining that an evil so serious depends upon so trifling a cause. Nor is it by any means a rare thing for the medical practitioner to join in the mistake, who adopts every remedy but the simple and proper one, and (as may be supposed) adopts them in vain. It is sometimes amusing to find what a little matter is necessary to effect a cure after the patient has gone the round of professional advice and treatment in vain.

Case XII. In the case of John Griffith, deafness had existed for a considerable time, and the patient had undergone a course of treatment for a nervous affection; but on carefully examining the ear, the whole affair was found to arise from hardened cerumen impacted at the bottom of the passage, by removing which hearing was instantly restored.

Case XIII. Mary Neale, aged 47, lost her place from the same simple cause; but speedily obtained relief.

I now have to notice a subject relating to acoustic surgery of the most important and most interesting nature. I allude to the forlorn condition of the deaf and dumb; in whom there is a complication of disease, the one misfortune arising out of the other: by which is to be understood the fact of incapacity of speech being dependent on the circumstance of the individual being born without the faculty of hearing. This state of the case being satisfactorily ascertained, the obvious inference is, that if the power of hearing can be imparted, that of speech will naturally follow—as this faculty is acquired

through the medium of the other, which, it is unnecessary to add, is developed at a much earlier period of infantile life—or is more probably coeval with existence. In fact, where any real relief is to be afforded, it must be through successful attempts on the organ of hearing; and where such a result takes place, the process is slow. Parents who have children labouring under this misfortune are accordingly very apt to be negligent in persevering to obtain the desired relief.

Great and even national efforts have been made, both at home and abroad, to remedy the defect in question; and the names of various amiable and ingenious individuals will be justly celebrated to all posterity as the benefactors of a class of sufferers, now, through their means, restored to the pleasures and the duties of social life. Emperors, kings, and it may be said popes, have smiled upon the efforts of a *De l'Epée* and a *Sicard*, and have not disdained personally to visit and examine into the progress of their interesting labours. Far be from me the wish to tarnish, in the slightest degree, either their lustre, or that

of others who have imitated their example: but the annals of the Royal Dispensary for diseases of the ear show the great importance of dealing with that organ, of habituating it to impressions of sound, of endeavouring to make it sensible of the diversity of sounds; and, when these are perceived, of conveying them to, and of impressing them on, the memory.

The sensations first received by patients of this description, from the impression of sounds, are painful; and it is not until the organ is habituated to them, and its functions gain strength through exercise, that the uneasy feeling goes off, and exposure to the impression becomes tolerable. The auditory, like other nerves, especially of sensation, possess at first a degree of morbid sensibility, which perseverance and habit will gradually diminish.

It has been remarked, that cases of this nature which have received benefit are such only as have undergone professional treatment; at least, such has been the fact in cases of perfect recovery. Whenever the plan of teaching by signs only has been pursued, the auditory organ is left in its original defec-

tive or morbid state; no means, under this system, being resorted to either to excite or to increase its powers; and the eye being principally, if not entirely, called upon to supply a substitute, where perhaps there may be a possibility of remedying the original evil*. Through the medium of this last-mentioned organ, the attention of the patient is attracted, and this alone serves as his guide in receiving and imparting ideas and information.

Forlorn, however, as such cases have generally been considered, and almost unintelligible as they have been too commonly looked upon, I feel it my duty to observe, that they are seldom characterised by any deficiency of structure in the auditory organ, which should be carefully and thoroughly examined, with a view to the detection of the real nature of

* Convinced, as I have long been, that deaf and dumb children, before admission into the asylum instituted for their education, should be submitted to the inspection of an aurist, I addressed a letter on the subject, so long ago as 1817, to the governors of that asylum; for a copy of which, as well as the medical treatment of the various affections of the ear, my last Treatise on the Physiology and Diseases of the Ear, containing sixty-eight cases, may be consulted.

the case. If no means, or no appropriate means, of relief be adopted, the imperfection is confirmed, and the case becomes utterly hopeless; or, which is indeed worse, a partial defect degenerates into a complete one, and the possibility which may once have existed of doing good is entirely removed.

The truth of these observations is proved by the fact of children having heard a little at an early period of infancy, and afterwards becoming perfectly deaf. In several instances perseverance has been ultimately crowned with success, although the nature of the case was originally such as to lead me almost to despair. I never fail, therefore, in whatever case, to urge, in the strongest manner, the propriety of making a trial; and no case whatever should be pronounced incurable until the hopeless result of well-applied endeavours shall have proved it so; and I am fully persuaded, that if it were the object to encourage medical treatment, in a degree corresponding to that with which the more attentive, though probably not more efficient schemes of a mechanical description (under the denomination of education) are received,

the amount of success would be greater, and the process would also be materially shortened. A great inconvenience, at least, if not indeed amounting to an objection, attached to the prevailing method, is the length of time required for the realisation of any benefit. The great point to be kept in view is the excitement, or development, of the auditory organ, which is the proper business of the surgeon, rather than of the schoolmaster, to whom the incurable may be consigned after the former has attempted his utmost in vain.

Case XIV. Mary Ann Hague (recommended by a worthy governor) became deaf and dumb, in consequence of a fever, in which indeed her life had been despaired of. The treatment of this case was attended with such difficulty, and the means employed at first were so unavailing, that but for the importunities of the mother, I am afraid I should have given it up in despair. The success which I had met with in private practice encouraged me, however, to persevere, and to give the patient every chance by varying the mode of treatment. Recovery

ultimately crowned my efforts, and the child can now both hear and speak.

Case XV. Mary Haines, who had been born deaf and dumb, was, at the age of four years, in this state brought to me at the Dispensary. Although one of six children, she is the only one who labours under any imperfection. Her mother, of course, attributes it to a fright she received during pregnancy. When I first saw the child, she was so emaciated that it appeared doubtful whether she would live; but after some time her general health improved, which has continued in a state of amendment, and she can now both hear and speak.

Case XVI. Selina Wilmot, aged seven years, brought by her mother to the Dispensary, was also born deaf and dumb. This patient gradually amended under my treatment; and since her advance towards puberty, she has, among other changes, completely acquired the faculties of hearing and speech, so that instead of becoming, as she has done, a useful member of society, she would certainly have remained a burden on her

friends, had her case not attracted benevolent notice.

In bringing this report to a conclusion, I think it proper to apprize the governors and supporters of the charity, that the line of practice which it is intended to encourage is accompanied with difficulties that do not attach to any other; some of which I may be excused for attempting to point out.

In the first place, The morbid changes incident to the organ of hearing are less familiar to the anatomist than many, perhaps I should say most, others. Two reasons may be assigned for this. The ear is not only a complicated, and, in great measure, a hidden organ, but it is one that is seldom examined after death. Secondly, Persons who labour under deafness are less expert at giving an account of their own feelings, when these are distinct from, or fall short of pain; so that the practitioner is thrown almost entirely upon the resources of his own judgment and experience for a clear idea of the nature of the complaint; and this is again dependent on extensive practice in a peculiar

line. In the third place, He has to encounter strong prejudices from various quarters; not the least influential of which are the patients themselves.

The report, however, speaks intelligibly enough as to the utility and practical benefits of the Institution; and, with regard to himself, the author would presume to hope that his diligence and success in the discharge of the duties to which, under the patronage of the governors, he has been appointed, will hardly be less apparent. He sincerely hopes that each succeeding year will be productive of increasing benefit to the afflicted, and that the Institution will consequently advance increasing claims to support.

Although the Author disclaims all pretension to enthusiasm, he is anxious to be believed in declaring, that during the residue of his life (which he purposes to devote exclusively to the cultivation of this neglected but important branch of the profession) nothing will afford him such genuine pleasure as being instrumental in the promotion of your benevolent object. As the active and attentive servant of your bounty, he will

do his utmost to second the well meant endeavours of that truly respectable and most benevolent body who have so liberally supported the establishment from its foundation to its present prosperous state. He feels bound, at the same time, to acknowledge, that among its supporters are to be reckoned many eminent members of the medical profession, to whom the warmest acknowledgments are due. Their example has had the happiest effect in stimulating and encouraging the liberal and benevolent of other classes, who, from observing the interest taken in the charity by medical men, have had the most satisfactory assurance of the importance of the object, and the validity of the means adopted for its realization. Amid the numerous establishments of a corresponding nature in this metropolis, such an one alone seemed wanting to fill up the vast and comprehensive scheme of provision for the relief of the afflicted poor. This want has been munificently supplied; and the request in which the supply has been held is alone sufficient to prove how greatly it was needed.

The rapid strides that have been made generally in medical, but more especially in surgical improvements of late years, have astonished the members of this profession themselves. Operations formerly unknown, or considered, if not impracticable, at least extremely hazardous, are now daily performed, with an accuracy and facility surpassing all former conception. Much of this is undoubtedly ascribable to the divisions that have been adopted in surgery, and which have been productive of no ordinary benefit to society. By means of greater dexterity on the part of the operator, the amount of pain and danger has been greatly diminished; and a better system of curing diseases has been introduced, whereby even the necessity for operating has been considerably abated. Among the reasons that might be assigned for the support of institutions whose object is the relief of particular organs, it may be enough to quote the assurance of the ailment in question being the prominent object of attention, and of the most approved means of relief being applied in the most skilful manner possible.

It must be confessed, however, that there are surgeons who discountenance these divisions, and affect to maintain that he who is competent to the general duties of the profession must, *à fortiori*, be qualified for its details. But were any farther appeal to facts necessary, it would be the easiest thing possible to show that a division of labour must insure excellence throughout its departments. This is a truism which few will venture to call in question, and while it is proper to admit the applicability of general principles, and the necessity of scientific acquirements, throughout all the departments of surgery, we must also allow that there are branches too recondite to attract any great share of notice on the part of the general surgeon, and which (though affording ample occupation to the individual who makes them the exclusive objects of his attention) but rarely furnish a case for the more comprehensive practitioner. In cases where peculiarities belong to the mode of discrimination or of treatment, and, in particular, where manual dexterity is of importance, the benefits of exclusive practice are confessedly

great. It would be almost *infra dignitatem* to quote the popularity and beneficial labours of the dentist; but the claims of the oculist being strictly analogous, can the meed of support and encouragement so liberally and readily accorded to him be, in justice or consistency, refused to the aurist? Nothing can be more evident than the confidence reposed by society in the practitioner, who concentrates his time and exertions upon particular diseases; and nothing can be a fairer inference than the existence of a necessity for meeting the public wishes.

THE END.

LONDON:
PRINTED BY THOMAS DAVISON, WHITEFRIARS.

SUBSCRIPTIONS LATELY RECEIVED.

	£	s.	d.
A. B. per Bosanquett, Pitt, Anderdon, and Co. . . .	100	0	0
Collection after a Sermon, preached at St. Anne's Church, Soho . . .	30	0	0
Collection after a Sermon, preached at the New Church, Mary-le-bone . .	61	0	0
Collection after a Sermon, preached at St. George's Chapel, Albemarle-street .	27	0	0
Collection after a Sermon, preached at St. Mary's Chapel, Park-street, Grosvenor-square	32	10	0
His Grace the Duke of Devonshire .	25	0	0
Lord Bexley	10	10	0
Earl Fitzwilliam	10	10	0
George Smith, Esq. 1, Upper Harley-street	1	1	0
George Watson Taylor, Esq. M.P. .	10	10	0
John Cardale, Esq. 2, Bedford-row .	2	2	0

	£	s.	d.
Thomas Snodgrass, Esq. 5, Chesterfield-street, May-fair	21	0	0
The Marquess of Anglesey . .	2	2	0
Sir Samuel Shepherd . . .	10	10	0
Miss Clements, 7, Hill-street . .	1	1	0
William Babington, M.D. Aldermanbury	2	2	0
Sir Astley Cooper, Bart. Spring-gardens	2	2	0
Lewis Leese, Esq. South-street, Finsbury-square	2	2	0
Miss Hankey, 18, Bedford-square .	1	1	0
Mr. W. B. Hudson, 27, Haymarket	1	1	0
Fuller Maitland, Esq. M.P. . . .	1	1	0
Colonel Robarts, Lower Grosvenor-street	1	1	0
The Earl of Egremont	10	10	0
Lady Dartmouth, Blackheath . .	1	1	0
William Lowndes, Esq. Somerset House	1	1	0
Robert Pope, M.D. Staines . . .	1	1	0
F. Lawley, Esq. M.P. 18, Grosvenor-square	1	1	0
Earl of Clarendon	1	1	0
John Bate, Esq. Russell-square . .	10	10	0
His Grace the Duke of Norfolk . .	2	2	0
George Haldimand, Esq. Seymour-place	10	10	0
Wilbraham Egerton, Esq. M.P. St. James's-square	10	10	0
Lady Style, Hammersmith . . .	1	1	0
Rev. Dr. Robert Price, Portland-place .	1	1	0
James Putnam, Esq. 45, Margaret-street	10	10	0
A. B. Drummond, Esq. Charing-cross .	1	1	0

	£	s.	d.
Dowager Lady de Clifford, 9, South Audley-street	1	1	0
Mrs. Lewis Lloyd, 19, Grosvenor-square	1	1	0
Bishop of Salisbury	1	1	0
W. Bury, Esq. Hope Insurance, New Bridge-street	1	1	0
W. Fairlie, Esq. 18, Park-crescent .	10	10	0
Lord Stawell, per Lord Sherborne .	2	2	0
Miss Vansittart, 31, Great George-street	10	10	0
Mr. Tucker, 18, South Molton-street	1	1	0
Dowager Countess of Clonmel . .	1	1	0
Roger Kynaston, Esq. 1, Portman-square	1	1	0
Earl of Darlington	1	1	0
A. A. Mieville, Esq. 21, Russell-square	1	1	0
Mrs. Goodwin, 21, Queen-street, Golden-square	1	1	0
Samuel Smith, Esq. M.P. Berkeley-square	2	2	0
G. H. D. Pennant, Esq. M.P. 56, Portland-place	2	2	0
John Holmes, Esq. Court of Requests, Guildhall	1	1	0
Mr. Pritchett, 37, Chamber-street, Goodman's-fields	1	1	0
Sir James Langham, Baronet, Langham-place	10	10	0
Mr. Davies, King-street, Soho . .	1	1	0
H. Ball Hughes, Esq. Oatlands . .	2	2	0
J. C. Reeve, Esq. 19, Russell-square .	1	1	0

	£	s.	d.
Mrs. Charles Bosanquet, Lower Grosvenor-street	1	1	0
Earl of Pembroke, Privy-gardens .	1	1	0
William Lettsom, Esq. 2, Verulam-buildings, Gray's-inn-lane . . .	1	1	0
Lady Harriot Ashburnham . .	1	1	0
Earl of Lonsdale	10	10	0
The Dowager Duchess of Buccleuch .	1	1	0
Lord Somerville, 18, Hill-street . .	1	1	0
The Duke of Rutland . . .	1	1	0
Thomas Metcalfe, Esq. Lincoln's-inn .	1	1	0
Thomas P. Brown, Esq. 82, Great Russel-street	1	1	0
Bishop of St. David's . . .	1	1	0
Lady Robert Manners, 37, Grosvenor-square	1	1	0
Earl of Harewood	1	1	0
Hon. Sampson Eardley . . .	10	10	0
John Curtis, M.D. Cowley . . .	1	1	0
John Julius Angerstein, Esq. Pall-Mall	10	10	0
The Hon. B. Cochrane, Portman-square	1	1	0
William Cobbe, Esq. 31, Regent-street	1	1	0
Mr. John Veal, Norwood . . .	1	1	0
Duke of Northumberland . . .	10	10	0
Lambert Fowler, Esq. 73, Gloucester-place	1	1	0
Mrs. Elers, 45, Gower-street . . .	1	1	0
Lord Sondes, Lees Court, Kent . .	10	10	0
Lady Sherborne	1	1	0

	£	s.	d.
Earl Spencer	10	10	0
Miss Finch	5	5	0
Mrs. Champion, 19, Grosvenor-square .	1	1	0
Mr. Davies, 31, Frith-street . .	1	1	0
George Hammersley, Esq. Pall Mall .	10	10	0
Mrs. Thomas Simpson, 36, New Bridge-street	1	1	0
Hon. Lady Smith, 144, Piccadilly .	1	1	0
General Cartwright, 14, Nottingham-place	2	2	0
Miss Drax Grosvenor, 8, Upper Grosvenor-street	1	1	0
The Hon. G. Agar Ellis, M.P. Spring Gardens	1	1	0
Henry Hugh Hoare, Esq. 6, York-street, St. James's	1	1	0
Lord Viscount Belgrave . . .	10	10	0
Thomas Dagnall, Esq. Cowley . .	1	1	0
Earl of Surrey	1	1	0
Mr. Hayward, 130, Great Titchfield-street	1	1	0
Mr. Brettell, Rupert-street, Haymarket	1	1	0
John Squire, Esq. 3, Pall Mall East .	2	2	0
John Penn, Esq. 10, New-street, Spring Gardens	1	1	0
James Tattersall, M.D. Uxbridge .	1	1	0
Mr. Thomas Palmer, Hounslow . .	1	1	0
Lord Viscount Sidney . . .	1	1	0
Mr. Pitt, Strand	1	1	0
Bishop of Bath and Wells . . .	1	1	0

	£	s.	d.
Mrs. Tighe, 17, St. James's-place .	1	1	0
James Macdonald, Esq. M.P. 8, Charles-street, Berkeley-square . . .	1	1	0
Marquess of Ailesbury . . .	1	1	0
Barry E. O'Meara, Esq. 18, Montague-square	2	2	0
Lady Leigh	3	3	0
Earl of Beverley, 8, Portman-square .	1	1	0
Mrs. T. Hibbert, 5, Langham-place .	1	1	0
Lady Williams Wynne, 33, Upper Brook-street	1	1	0
Hon. William Powlett, 19, Curzon-street	1	1	0
Lady Stanley, 33, Devonshire-place .	1	1	0
Marquess of Salisbury, Park-place .	1	1	0
Miss Cotes, 22, Lower Brook-street .	1	1	0
William Haldimand, Esq. M.P. 38, Lower Grosvenor-street	10	10	0
A. L. Provost, Esq. Clapham Common	10	10	0
Mrs. Taylor, 61, Harley-street . .	1	1	0
Sir Robert T. Farquhar, Bart. 13, Bruton-street	10	10	0
Hon. W. S. Ponsonby, St. James's-square	10	10	0
Dowager Countess of Pembroke, 18, Cavendish-square	1	1	0
Lady E. Pelham, 43, Upper Brook-street	1	1	0
Hon. Mrs. Hope, 1, Mansfield-street .	10	10	0
Earl of Besborough, St. James's-square .	1	1	0
Captain Blagrove, 16, Queen Ann-street	1	1	0

	£	s.	d.
John Lee, Esq. Bath . . .	1	1	0
Thomas Prower, Esq. 35, Piccadilly .	1	1	0
Miss Smith, Blackheath . . .	2	2	0
The Rev. R. P. Beachcroft, 62, Guildford-street	1	1	0
W. Wilson, Esq. 7, Nottingham-place .	1	1	0
Thomas Crafer, Esq. Belmont-place, Vauxhall	1	1	0
Samuel Pole Shaw, Esq. Southgate .	1	1	0
J. C. Bond, Esq. Bath . . .	1	1	0
Marquess of Ely	1	1	0
Mr. Reid, St. Martin's-lane . .	1	1	0
Alexander Baring, Esq. M.P. Piccadilly	10	0	0
Mrs. Denison, 2, Portman-square .	1	1	0
Earl of Caledon	1	1	0
William Stevens, Esq. Cowley . .	1	1	0
R. S. Harrison, Esq. 9, Montague-place	1	1	0
Earl of Hardwicke	5	5	0
William Parker, Jun. Esq. Lincoln's Inn-fields	1	1	0
Henry Cowper, Esq. Old Palace-yard	5	5	0
Davies Davenport, Esq. M.P. Lower Brook-street	10	10	0
Robert Barclay, Esq. Bury Hill, Surrey	10	10	0
Mr. Murray, Woodstock-street . .	1	1	0
Daniel Henry Rucker, Esq. 29, Mincing-lane	1	1	0
Mr. Dolman, 21, Hunter-street, Brunswick-square	1	1	0

	£	s.	d.
William Heydon, Esq. Guilford . .	1	1	0
Lord Roseberry, Piccadilly . .	1	1	0
John Trower, Esq. Portman-square .	1	1	0
Earl of Harrington	1	1	0
Dowager Lady Shee	1	1	0
William Yates Peel, Esq. M.P. 10, Stratton-street	1	1	0
John Wells, Esq.	10	10	0
Henry Hoare, Esq. 37, Fleet-street .	1	1	0
Mr. J. G. Nash, 14, New Gloucester-street, Hoxton	1	1	0
T. Gotobed, Esq. 82, Great Russell-street, Bloomsbury	1	1	0
A Friend, per Henry Cline, Esq. .	5	0	0
J. Entwistle, Esq. York-terrace, Regent's Park	1	1	0
Lord Bagot, 1, Great Cumberland-street	1	1	0
John Thorpe, D. D.	1	1	0
The Right Hon. George Canning .	1	1	0
Mrs. Delmar, Hyde Park-place . .	1	1	0
W. Fox, Esq. 44, Russell-square . .	1	1	0
Joseph Delafield, Esq. 39, Bryanstone-square	10	10	0
Lady Ashburton	1	1	0
Mr. Rice, 123, Mount-street, Berkeley-square	1	1	0
Mr. Doubleday, Pimlico . . .	1	1	0

THE

PLAN OF LECTURES

ON THE

Anatomy, Physiology, and Pathology

OF

THE EAR,

BY JOHN HARRISON CURTIS, Esq.

TO COMMENCE ON MONDAY, OCTOBER 1, 1827,

At Seven o'Clock in the Evening,

AT

The Royal Dispensary

FOR CURING DISEASES OF THE EAR,

DEAN-STREET, SOHO.

ARRANGEMENT OF THE COURSE.

In the Introductory Part will be considered, the Importance of the sense of Hearing as the medium of social intercourse; the various degrees of this Sense in the several tribes of Animals: with the different construction of the organ for that purpose.

The Anatomy of the Human Ear will be described, as divided into external, intermediate, and internal parts; and the description will be illustrated by anatomical preparations.

The Physiology, or Uses of the different parts of the Ear, will be next examined.

On finishing the Structure and Uses of the Ear, the various Diseases occasioning Deafness will then be considered, treating them in the same order in which the Structure has been described.

This order will comprehend, first, the Affections of the Meatus Auditorius, or external Ear; secondly, those of the Tympanum, viz. its puriform discharge, and the Obstruction of the Eustachian Tube, with the operation; thirdly, the Diseases of the Labyrinth, whether constitutional,—as nervous, scrofulous, syphilitic, &c.—or local, as Paralysis of the Auditory Nerve, defective Organization, &c.

The Subject will conclude with general Remarks, applicable to this class of Diseases; to which will be added, Considerations on the best means of treating the Deaf and Dumb.

A Clinical Lecture will be given during each Course on the most important Cases that occur at the Royal Dispensary.

Terms of the Lectures.

Single Course . . .	Two Guineas.
Two Courses . . .	Three Guineas.
Perpetual . . .	Five Guineas.

TERMS FOR ATTENDING THE PRACTICE OF THE DISPENSARY.

Three Months . . .	Five Guineas.
Six Months . . .	Eight Guineas.
Perpetual . . .	Ten Guineas.

For Particulars apply to Mr. Curtis, *at his House, No. 2, Soho-square, or at the following Hospitals; St. Thomas's, Guy's, St. Bartholomew's, St. George's, the Middlesex, and the Westminster.*

The Lectures will be continued regularly, the same as the preceding Seasons; namely, from the 1st of *October* until the latter end of *May*.