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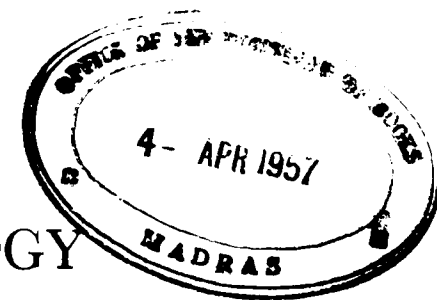
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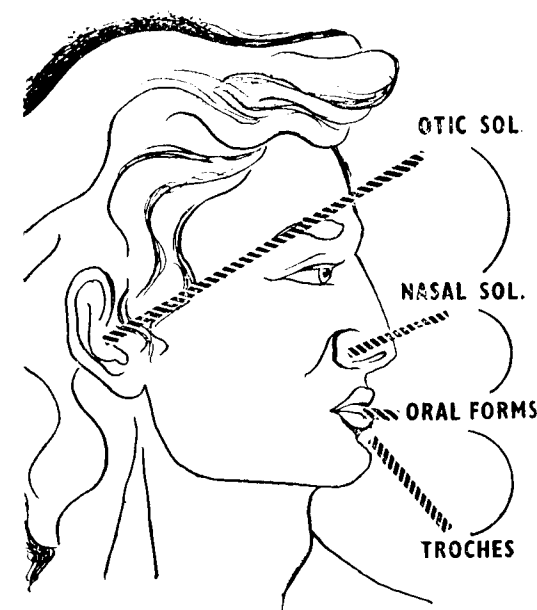
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1. Arslan, M. and de Vido, G. *Athena*, 18:1 1952.
2. Pettefield, T.G., et al: *Phila. Gen. Hosp.*, 2:6 1951.
3. Wolman, R., et al: *B. M.J.*, 1:419 1952.
4. Wright, L.T., et al: *Antibiotics & Chemotherapy*, 1:165 1951.

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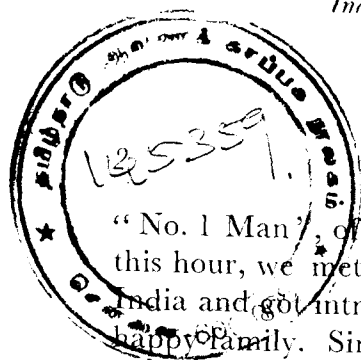
OFFICIAL SCIENTIFIC JOURNAL OF THE ASSOCIATION OF OTOLARYNGOLOGISTS OF INDIA

Ninth Annual Conference of the Association
of Otolaryngologists of India

The Ninth Annual Conference of our Association was held at Jamshedpur, "The modern steel city of India", during December, 1956. This conference, if I may say so, turned out to be one of the best, if not, the best, of all the conferences we have had so far. Though Jamshedpur is not one of the big cities of India as compared to Bombay, Calcutta or Madras and though it is not easy of access to the various E. N. T. surgeons from different parts of India, still the conference had the maximum attendance we have had so far. And not one of the fifty and odd members who attended the conference had to regret their coming leaving their practice and work behind.

Most of us arrived at Tatanagar on Saturday, the 29th December and we had a warm welcome even at the Railway Station. Some of the Reception Committee members and the volunteers were there at the station to receive us and put us up in places allotted for our stay. Barring two of us all the other members were accommodated in private homes and the hospitality extended to us, during our stay, by our hosts was really something that will be remembered for long. That night many of us met at the residence of Dr. and Mrs. Nath for dinner, after the meeting of the Governing Body.

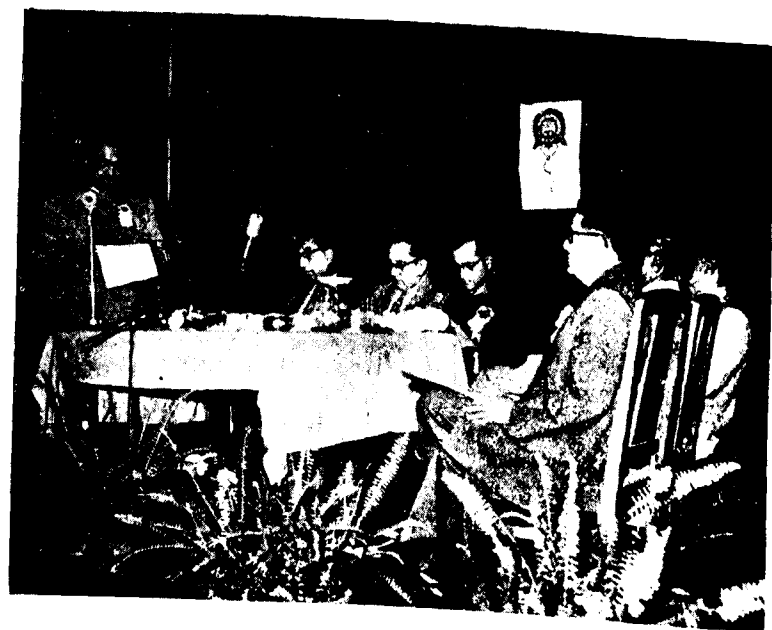
On Sunday, the 30th December we all assembled at the beautifully decorated hall of the United Club and after the registration of delegates etc., we spent an hour in waiting for the



Ninth Annual Conference

"No. 1 Man" of Jamshedpur, Sir Jehangir Ghandy. During this hour, we met all our old friends from different parts of India and got introduced to the new ones who came to join the happy family. Sir Jehangir had to fly from Calcutta just for the special purpose of meeting us and inaugurating the conference. Immediately on his arrival, we had our group photograph which was followed by the inaugural meeting held in the colourfully decorated hall.

Dr. Dukhan Ram, our most popular senior brother of our family and Chairman of the Reception Committee delivered the welcome address and it was really a very warm and welcome beginning of the conference. Sir Jehangir Ghandy next delivered the Inaugural Address, an address, which one and all of us appreciated very much. This was followed by the Presidential Address by Major K. K. Gosh. Befitting the position of the president, the address was really well thought out and excellently delivered. We were not able to say whether his address or that of Dr. Tulsi Das of last year was the better of the two. For those members who were not lucky to be present at the meeting, the presidential address is published in this issue and I am confident that even those who were present



Welcome Address

BY

Dr. D. RAM, B.Sc., M.B., D.L.O., D.O.M.S. (London)
Chairman, Reception Committee, Jamshedpur.

Sir Jehangir, Mr. President, Ladies & Gentlemen,

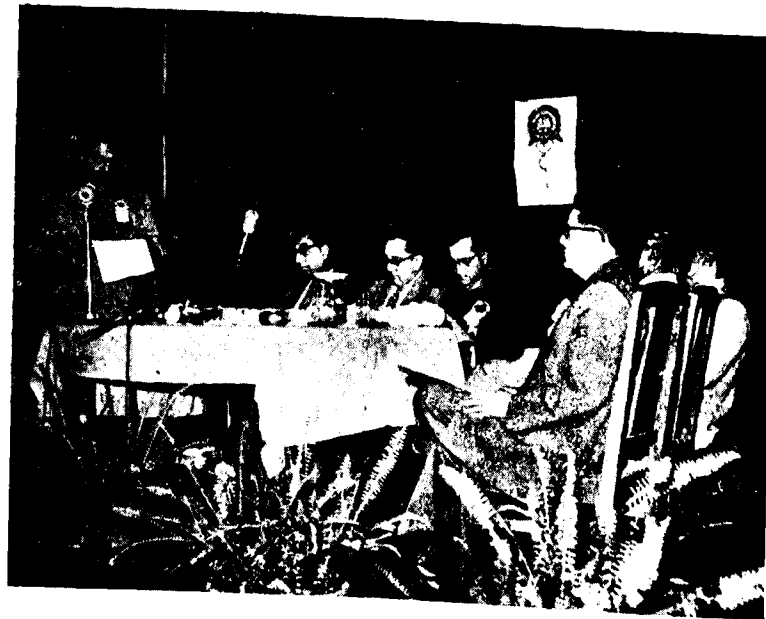
This is the second time I have the pleasure of welcoming the members of the Association of Otolaryngologists of India in the State of Bihar. The first time I welcomed you at Patna in 1952, at a time when the annual session of the All-India Medical Association was also held there. This time I am welcoming you, here in Jamshedpur, the modern steel city of India. Jamshedpur cannot boast of an ancient past like Patna, but in modern times, certainly she can claim to be the maker of India in the industrial world.

I will now narrate to you briefly the history of Jamshedpur. This city takes its name after one of the greatest industrialists of the 19th century, Sir Jamshedji N

cocktail party thrown by General Master, we adjourned to the Andhra Club in a 'Wet Manner', (because it was also a rainy night) for the President's dinner. The dinner was a well attended and grand one and was followed by a very interesting entertainment. The entertainment was followed by many of the members going to different clubs to keep awake to welcome the New year.

On the New Year's morning we proceeded to a lovely guest house built on the banks of the beautiful and romantic "Dimna" lake where the General Body meeting was held.

The general body meeting was scheduled to start at 8-30 p.m. on the New Year's day but due to some delay in the bus transport the majority of members reached Dimna lake guest house only at 10-30 a.m. But Dr. Cooper, our secretary, waited for our arrival to commence the meeting. Though he could very well have finished the general body meeting especially as the president, a few past presidents and the treasurer had come there in time. We really appreciated the good gesture of the secretary and others who decided to wait for us instead of repeating what was done last year. The general body meeting went off very well in an atmosphere of good understanding, healthy co-operation and friendly feelings. The members were unanimous in voting Dr. Cooper as the President and Dr. Joe V. DeSa as our secretary. The general body also decided to hold its future conferences by the end of January instead of at the X-mas season. After the general body meeting was over we spent 15 minutes in looking round and admiring the beautiful place



Welcome Address

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Dr. D. RAM, B.Sc., M.B., D.L.O., D.O.M.S. (London)
Chairman, Reception Committee, Jamshedpur.

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that I am not a resident of this beautiful town, but whenever I come to this town I always visit this place for a picnic and I intend to join you if a picnic is arranged.

It is the second largest town in Bihar with a population of 2.5 lacs with planned modern roads and a first rate Municipality when compared to our capital town, Patna. About 100 miles away from here is Ranchi, our Summer capital, and the road is so picturesque that one can enjoy the finest drives passing through the dense jungles and hill sections and ghats. Coming to the town itself, it is one of the best cosmopolitan towns of India. Here you will find people of all States merged together and working shoulder to shoulder in a national enterprise of production of steel and you can have a talk in your own colloquial language if you so desire.

This town is growing so fast that after some time it may well become the largest town in the State. As regards medical facilities I think this town can boast of good hospitals and good doctors including specialists. The climate of this place is a bracing one, and there is no rigours of winter or summer. In the political field, I may mention that the great labour leader of Jamshedpur Shri Abdul Bari, who was assassinated in the prime of his life and thus the town lost one of its able leaders.

Having briefly told you about the growth of this town I will now ask you to pardon me for the shortcomings



Inaugural Address

BY

SIR JEHANGIR GHANDY,

Director-in-Charge, Tata Iron & Steel Co. Ltd., Jamshedpur.

Mr. President, Dr. Dukhan Ram, Ladies & Gentlemen,

I wish to thank you for your kindness in asking me to inaugurate this conference of ear, nose and throat experts. May I assure you that I consider it a privilege as well as a pleasure to be associated with this function?

I cannot

also responsible for the maintenance of services of a municipal nature, including medical and health services. We have a hospital with a standard bed strength of 460 and it has all the main specialist departments that one finds in any major hospital. In this town, which is a conglomerate of communities, the human problems are not only diverse but also complex. It is, therefore, all the more necessary here that the specialist should broaden the window of his mind and be sympathetic and understanding; otherwise, it would be difficult for him to make a success of his assignment. This is true not only inside the works, but also in the medical and other departments outside the factory gate. What I have said, therefore, is based not on mere text-book knowledge, but on experience of life itself in this town, an experience which extends over a period of nearly forty years.

So far as our E. N. T. department is concerned, I am informed by Dr. Nath, your enthusiastic secretary, who is in charge of this department, that there is a higher health-consciousness here than elsewhere in the country, and patients suffering from ailments of the ear, the nose or the throat, are more prompt in seeking medical attention.

It has been noticed at our E. N. T. clinic, however, that patients do not always pay sufficient attention to children who breathe through the mouth. It is apparently not realised that this habit may spring from adenoidal troubles and that prompt attention in early childhood can cure the child of his adenoidal ailment and



Two views of the delegates attending the Conference



Presidential Address

BY

Major K. K. GHOSH, M.B., F.R.C.S., D.L.O.

S

ladies; for they would have to shoulder the real responsibility but, I am sure, they will end up by being very happy about it and find very fine new friends in their guests. May I also thank Principal Mahavir Singh of the Jamshedpur Co-operative College, Mr. K. K. Roy, Principal of the R. D. Tata High School and Mrs. Abraham, Vice-Principal of the D. M. Madan Girls High School, for having readily agreed to send their students to act as volunteers and also those young people for the willing service?

The Reception Committee's thanks are due to Mr. A. K. Basu, Town Administrator and to the Public Relations Department of the Steel Company, and its heads in Calcutta and Jamshedpur, Messrs D. Mukherjee and J. Sanyal for a great deal of help in organization; to Messrs Mahajan, Gavande and Roy of that Department for designing and getting printed the beautiful souvenir of this conference that you will take back with you and to Mr. Mahendar Singh for his helpful advice on transport arrangements and the planning of the local sight-seeing tours. The sight-seeing at the mines has been kindly organised by Mr. C. J. J. R. Raju, our Superintendent of Ore-Mines and Quarries and his staff to whom we are very grateful for their kindness. We thank Dr. A. K. Ghosh, President of the Indian Medical Association, Jamshedpur Branch, Dr. D. N. Mukherjee and Mr. Nagin Parikh of the Jamshedpur Motor Accessories for the tea parties on the three days of the conference. Our thanks are also due to Mrs. Gulnaar Madan, the Secretary of the Nritya Niketan and Mr. Indra Kumar Mahanty, dance master of that

I am happy to have you all here from all the four corners of India. We have tried to make your stay comfortable and your visit worthwhile in spite of our short comings. Very soon you would be discussing the problems of your speciality and I have no doubt that with the distinguished crowd of E. N. T. specialists that has gathered here you will iron out most of the problems arising in your speciality.

Jamshedpur is a unique town in India, where the whole administration of the Town is carried out by the Company and Company alone without City Fathers. The burden and expenses of preventive and curative medicine is borne by the Company. It is a place where no employee has to pay any municipal rates and taxes. The hospital treatment is given free not only to the employees but also their dependents including their venerable parents. The hospital in Jamshedpur made a very small beginning nearly 50 years ago with 12 beds but now Jamshedpur has the proud privilege of having a full fledged hospital of 420 beds with 13 different specialists looking after various sections of the hospital. The E. N. T. department came into existence 5 years ago as a separate entity and as you know Dr. Nath administers this department with credit and success. He tells me that Jamshedpur population is more conscious of the E. N. T. troubles than anywhere else. That is a fact, but how much is due to their E. N. T. consciousness, and how much is it due to the free expert advice and treatment that is given by the specialist, I leave you gentlemen to judge. The consciousness towards ones health should come up with the march of time but unless the specialists are there either paid by the Government or by private companies, this consciousness

Stapes Mobilization*

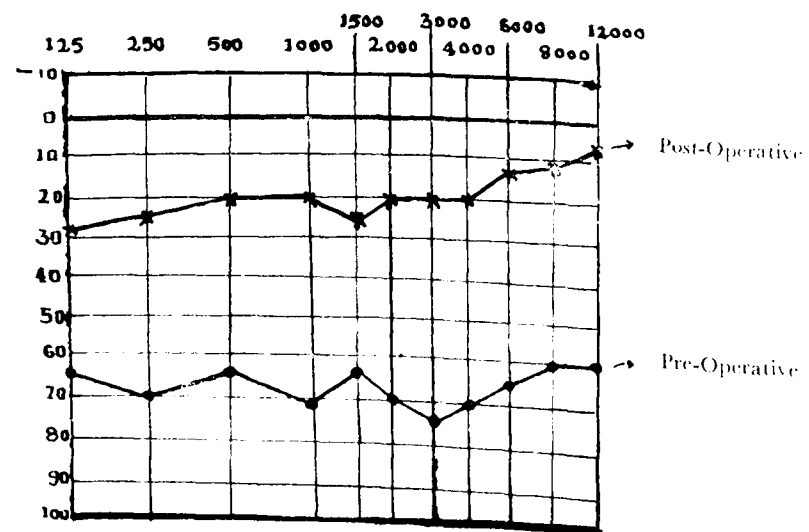
BY

Dr. C. M. LEELAVATHY, M.B., M.S., D.L.O., (LONDON),
*Professor of E.N.T., diseases, Madras Medical College, and E.N.T. Surgeon,
 Government General Hospital, Madras.*

The two outstanding surgical efforts to relieve deafness are fenestration and stapes mobilization. While fenestration operation aims at the creation of a new route for the transmission of sound through an artificially made window in the bony labyrinth, the stapes mobilization operation aims at the restoration of normal passage through a defective ossicular system.

Stapes Mobilization operation has had a chequered history. Kessel attempted the operation as early as 1876. In 1878 Boucheron performed the operation separating the incus from the stapes and excising the posterior half of the drum on 60 patients. The real credit for enlightening the otologists of the period must however go to Miot who in 1890 gave a detailed description of the operative procedure, together with its

The audiogram of patients who have shown definite improvements are shown in Figs. 2--5 (Audiogram before and after operation).



membrane is finally lifted out of its sulcus and folded forward and upward upon itself, thus exposing the posterior part of the middle ear. In almost all cases the Incudo-stapedial joint is seen (Fig. 8).

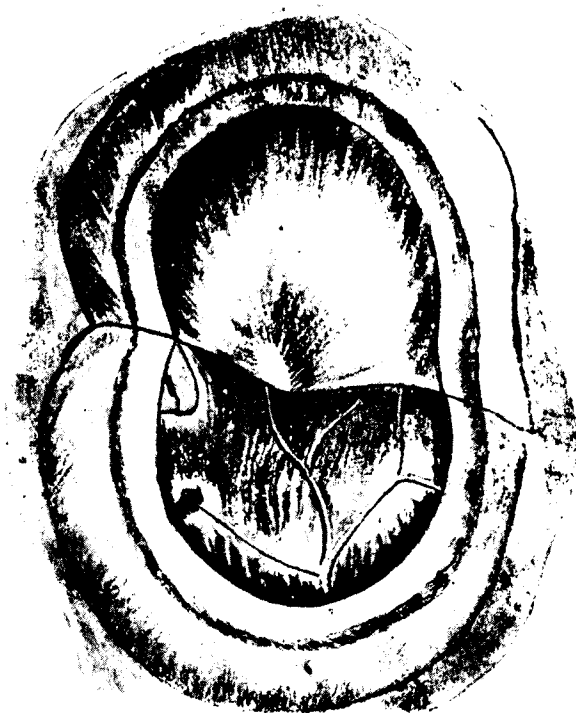
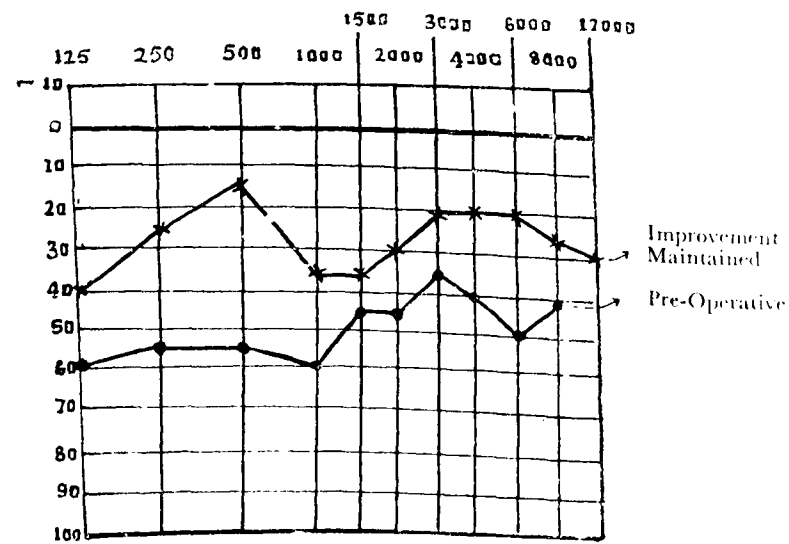
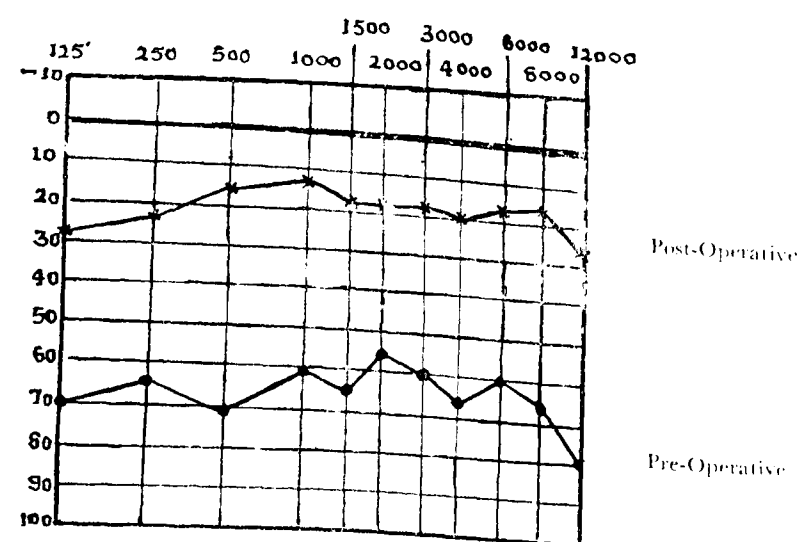


Fig. 8. T. Membrane folded upon itself. Incudo-stapedial joint is seen

The postero-superior bony annular quadrant is next removed exposing the stapedius muscle, the crura, the footplate of the stapes and the oval window (Fig. 9). Occasionally, the chorda tympani nerve may have to be cut. Mobility of the stapes is assessed by applying pressure over the neck of the stapes. (Fig. 10). The degree of mobility can be "Seen". The procedure advocated by Austin Sheer in assessing the mobility by noting the contraction of the stapedius is not found practicable under the magnification used by me for the operation.

(Immediate improvement and later loss) and Fig. 14 (Improvement maintained). One patient had immediate improvement





(b) Large	...	117
(from 2-4 mm. diameter)		
(c) Very Large and almost completely destroyed tymp. memb.	...	67
2. Marginal Perforations	...	42
None of these was very small or very large. All were of medium size.		
3. Operated Mastoids	...	7
4. With Narrow Ext. Aud. Canal, due to Ext. Otitis and presence of Granulations	...	9
Total number of ears treated	...	350

The results of ears treated by me are as noted below :

Table I. showing comparative response of treatment of various ears of C. S. O. M.,—350 via Eust. tube and 90 by usual routine method. (Ext. canal)

Table No.

The patient was asked to come for check up every month but as is the habit of our patients, after recovery from some disease he returned only after a lapse of 10 months on 12-12-56. On examination the palate was found normal both structurally and functionally. There was no evidence of recurrence of the new growth. The depression in the Basisphenoid which was found at the time of discharge from the hospital was not present on posterior rhinoscopic examination. The patient who was not in good health at the time of operation, not only exists to-day but has chosen wrestling as his profession.

The remarkable features of the case were:—

1. The operation was undertaken on an emergency basis without adequate time for preparation.
2. Spine only of the hard palate was removed.
3. The tumour was removed in one mass under direct vision.
4. Though the bleeding during the operation was considerable there was negligible bleeding after the tumour was separated from its bed.
5. Posterior nasal pack was not applied.
6. Palate returned to normality only 12 days after the operation.

Case Reports

CASE II—RHINOSPORIDIUM NOSE



Before Operation

Note growth in infra orbital region and also protruding outside through Right Nostril.



After Operation

Scar of operation in infra orbital region and absence of growth from Right Nostril.

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