

# General Notes

## FESS WORKSHOP

25th and 26th March 1994

A one and a half day course at  
the Institute of Laryngology and Otology

Organised by V J Lund and I S Mackay

The workshop will include live demonstrations of functional endoscopic sinus surgery, discussion on diagnostic endoscopy and CT scanning and cadaver dissection.

Maximum number of delegates: 15

The workshop is supported by Richard Wolf, who will supply endoscopic instrumentation, video and camera systems.

Course fee: £210 (including lunch on Friday, 25th)

For an application form please apply to:

Administration,  
Institute of Laryngology and Otology,  
330/332 Gray's Inn Road,  
London WC1X 8EE

Tel: 071-837-8855 Ext. 4214

Fax: 071-837-9279

## BRITISH SOCIETY OF ALLERGY AND CLINICAL IMMUNOLOGY

### MEDICAL AND SURGICAL MANAGEMENT OF RHINITIS

FRIDAY 18 MARCH 1994

One day teaching course for ENT surgeons and trainees.

Venue: The London Hospital Medical College  
Organizer: Dr Rita Mirakian  
Registration fee: £50.00

Approved by the British Postgraduate Medical Federation.

For further details and registration forms please contact:

Immunology Department Secretariat,  
London Hospital Medical College,  
56-76 Ashfield Street,  
London E1 2AD.  
Tel: 071 377 7748.  
Fax: 071 790 3033.

## LIONEL COLLEDGE MEMORIAL FELLOWSHIP

The next award or awards of the above Fellowship will be made for the year commencing 1 July 1994. The maximum award to any one Fellow will be £3,000.

The following conditions are laid down by the Trust:

1. Applicants must be United Kingdom born Fellows of the Royal College of Surgeons of England aged between 25 and 35 years at the closing date for receipt of applications. They must be senior trainees or recently appointed consultants, or of similar status, in otolaryngology, rhinology or otology.
2. The subject of the award is head and neck surgery with an emphasis on laryngology, rhinology or otology.
3. The Fellowship is tenable for a period of study or research abroad.

Applications for the award or awards must reach the Secretary of The Royal College of Surgeons of England, 35/43 Lincoln's Inn Fields, London WC2A 3PN not later than 31 March 1994 and must include the following:

- (a) Name, qualifications and brief curriculum vitae, including present appointment;
- (b) proposals for the tour or visit to be made during the tenure of the Fellowship;
- (c) letters of support from the applicant's present consultant (or, if already a consultant, the name of an independent referee in the United Kingdom) and the head(s) of the department(s) to be visited;
- (d) a statement of the expenses to be incurred and of available financial resources.

Short-listed applicants may be required to attend for interview in London, in which case necessary travelling expenses will be reimbursed.

R. H. E. Duffett,  
Secretary,  
Royal College of Surgeons of England,  
35/43, Lincoln's Inn Fields,  
London, WC2A 3PN

INTERNATIONAL SYMPOSIUM ON RECENT ADVANCES IN  
OTOLARYNGOLOGY HEAD & NECK SURGERY

SPONSORED BY SAUDI ARABIAN NATIONAL GUARD (SANG)

DATE: 29TH SHAWWAL – 1 DHULQADAH 1414H

10–12 APRIL 1994

TO BE HELD AT KING FAHAD NATIONAL GUARD HOSPITAL,  
RIYADH, KINGDOM OF SAUDI ARABIA

Guest Faculty includes:	Professor Ugo Fisch	Switzerland
	Professor W. P. Gibson	Australia
	Dr John W. House	USA
	Dr Ivo P. Janecka	USA
	Dr John N. G. Evans	UK

Scientific papers, new innovations, video tape demonstration and scientific posters are invited. No registration fee.

For full details, please contact:

Dr S. A. Kamal,  
Chairman, Scientific Committee,  
P.O. Box 22490, Riyadh 11426,  
Kingdom of Saudi Arabia,  
Tel no: 966-1-491-7788 Ext 2340  
Fax no: 966-1-491-7788 Ext 2567

Last date of submission: 31 December 1993, 18 Rajab 1414H

PRACTICAL ANATOMY AND SURGICAL TECHNIQUE WORKSHOP

COURSES ON TEMPORAL BONE DISSECTION (in English)

Design: This workshop provides the individual opportunity for:

- Live surgeries on different techniques performed by Gruppo Otologico
- Video presentation of techniques and clinical cases
- Didactic presentations
- Performing the surgical procedures on specially prepared bones
- Discussions

For additional information:

Contact:

Secretary Gruppo Otologico,  
Via Emmanuelli n. 42,  
29100 Piacenza—Italy.  
Telephone 0523/754362. Fax 0523/453708

PRACTICAL ANATOMY AND SURGICAL TECHNIQUE WORKSHOP

COURSES ON THE LATERAL APPROACHES TO THE SKULL BASE (in English)

A CADAVER HANDS-ON WORKSHOP

Design: This workshop provides the individual opportunity for:

- Video presentation of techniques and clinical cases
- Didactic presentations
- Performing the surgical procedures on specially prepared bones and half heads
- Discussions

For additional information:

Contact:

Secretary Gruppo Otologico,  
Via Emmanuelli n. 42,  
29100 Piacenza—Italy.  
Telephone 0523/754362. Fax 0523/453708.

INTERCOLLEGIATE SPECIALTY EXAMINATION IN OTOLARYNGOLOGY

ROYAL COLLEGE OF SURGEONS OF EDINBURGH  
ROYAL COLLEGE OF SURGEONS OF ENGLAND  
ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF GLASGOW  
ROYAL COLLEGE OF SURGEONS IN IRELAND

The next Intercollegiate Specialty Examination in Otolaryngology will be held in the Royal College of Surgeons of England, London on 21/22 April 1994.

Regulations and application forms are available from the Secretariat, Intercollegiate Specialty Boards, 10 Hill Square, Edinburgh EH8 9DR (031 556 7079). The closing date for receipt of applications is Thursday 24 February 1994. Fee: £250.

# Instructions to Authors

**Review Articles.** Articles of this type, preferably not exceeding 3,000 words will be considered but the author(s) are expected to be a recognised authority on the topic and have carried out work of their own in the relevant field.

**Historical Articles.** Articles of this type are generally encouraged, but it is obvious that they have to provide some new information or interpretation, whether it be about a well-known person or for example an instrument associated with him, but those from within a Hospital's own department who have made a hitherto less well-known contribution would be welcome.

**Letters to the Editor.** This feature has been re-introduced to give those who wish to comment about a paper previously published within the Journal, an opportunity to express their views. Wherever possible, the original author is asked to add his further comment, thereby adding to the value of the contribution. Such letters should be sent as soon as possible after publication of each month's issue of the Journal in the hope of including them early thereafter.

'Mini-papers', such as those which appear in the British Medical Journal, Lancet, or New England Journal of Medicine, will not be acceptable except on the rare occasion that they bring information of immediate interest to the reader.

**Pathology.** Articles which are of pathological interest with particular emphasis on the way the diagnosis was achieved now appear on a monthly or bimonthly basis. It is hoped that clinicians will involve their pathologists in these reports, and all illustrations must be of first-class quality. Where a department, particularly those overseas, may not have such specialized facilities, it may be possible, if a block or several unstained sections are provided for our Adviser to produce or supplement the illustration submitted. Only contributions of particular pathological interest will be accepted.

**Radiology.** Short reports on cases in which the radiology has been crucial in the making of the diagnosis or the management of a particular case now appear on a monthly or bimonthly basis. This spot is to encourage clinicians and radiologists to produce material of particular interest in the specialty and to encourage co-operation in this field. Only presentations with first-class illustrations can be accepted and these must emphasise a problem of unusual clinical interest.

**Short Communications.** This feature will be used on an occasional basis. Examples of material suitable for inclusion under this title would be, for example: a piece of work which was of clinical interest but had failed to produce findings which were of statistical significance; where an investigative technique has been applied to an allied field, not warranting a further in-depth description of its earlier application and methodology.

'**Silence in Court**'. Articles on medicolegal topics are welcome but a preliminary letter written beforehand is requested to ensure that the contribution would be appropriate.

## Check List for Authors/Secretaries

1. Title page—Titles should be short with names of the authors, higher degrees only and the city/country. Details of the departments in which the authors work should be put lower down.  
An address for correspondence should be supplied together with the author who should receive this; this will ultimately appear beneath the list of references. If the paper was presented at a meeting, the details of this must be given and will be inserted at the bottom of the first page of the printed script.
2. Abstract—No paper will be accepted without this and it adds considerably to the Editor's time to have to write and request this if the paper is accepted.
3. Key Words—only those appearing as Medical Subject Headings (MeSH) in the supplement to the Index Medicus may be used; where appropriate word(s) are not listed those dictated by common sense/usage should be supplied.
4. To follow the instructions to Authors with the way in which the paper is set out. It is preferred that each section should start on a fresh page with double spacing and wide margins.
5. References must be in the Harvard system; to submit a paper using the Vancouver system is automatically to have it returned or rejected.
6. Two sets of illustrations must be included, one of half-plate size and the other with the width of 80 mm. Illustrations must be clearly labelled with the author's name on the reverse side and where appropriate with an arrow to give orientation.
7. Authors to check manuscript and references to see that these match up particularly for dates and spelling.
8. Title of Journals must be given in full with the date, volume number and first and *last* pages.
9. Consent to be obtained from a patient if a photograph of their face is to be reproduced.
10. If the author to whom correspondence is to be directed changes his address, he should let the Editorial Office know as soon as possible.
11. Page proofs will normally be sent out one month in advance and must be returned as soon as possible.
12. Authors should provide a Facsimile number (FAX) whenever possible to speed communication. The FAX number of the Editorial office is 0483 451874.
13. Manuscripts with tables only may be transmitted by FAX; those with graphic or visual illustrations, e.g. graphs, X-rays, pathology, electrical records (ENG, BSER etc) must continue to be sent by post as the quality of reproduction does not give sufficient accuracy of detail.

<b>Editorial</b> . . . . .	1
<b>Review Articles</b>	
Temporal bone dissection for display: <i>D. G. Golding-Wood</i> . . . . .	3
Preparation of a temporal bone exhibit: <i>B. Natarajan, A. Baxter</i> . . . . .	9
<b>Main Articles</b>	
The deafness, pre-auricular sinus, external ear anomaly and commissural lip pits syndrome—otological, vestibular and radiological findings: <i>H. A. M. Marres, C. W. R. J. Cremers, P. L. M. Huygen, F. B. M. Joosten</i> . . . . .	13
The use of the rigid endoscope in trans-sphenoidal pituitary surgery: <i>A. Gamea, M. Fathi, A. El-Guindy</i> . . . . .	19
High frequency jet ventilation—a review of its role in laryngology: <i>K. L. Evans, M. H. Keene, A. S. E. Bristow</i> . . . . .	23
Interjugular neck dissection and post-operative irradiation for neck control in advanced glottic cancers—are we justified?: <i>A. M. Shenoy, A. Nanjundappa, P. Kumar, R. V. Kumar, B. K. M. Reddy, V. Kannan, N. Anantha</i> . . . . .	26
Temporomandibular joint capsule prolapse: a technique of repair using autograft cartilage: <i>S. R. Saeed, N. R. Saeed, G. B. Brookes</i> . . . . .	30
Gastric tube transposition for cancer of the hypopharynx and cervical oesophagus: <i>J. P. Marmuse, C. Guedon, V. N. Koka</i> . . . . .	33
<b>Audit Article</b>	
The influence of medical audit on the management of epistaxis in three district general hospitals: <i>P. Murthy, C. Christodoulou, N. Yatigamma, M. Dato</i> . . . . .	38
<b>Short Communications</b>	
Dilation of simultaneous laryngeal and oesophageal stricture with two T-tubes: <i>Z. Wang</i> . . . . .	42
The extraction and re-implantation of teeth for the difficult laryngoscopy: <i>M. J. Wareing, E. W. Fisher, R. H. Manning, R. F. Gray, W. T. Lamb</i> . . . . .	44
Use of the Carden anaesthetic tube for surgery around a tracheostome: <i>D. R. Strachan, A. R. G. Grace, I. J. B. Jackson, G. L. Richardson</i> . . . . .	46
<b>Clinical Records</b>	
Primary amyloidosis of the external auditory canal: case report: <i>A. Panarese, N. J. Roland, B. Green</i> . . . . .	49
Temporal bone fibrous dysplasia and cholesteatoma leading to the development of a parapharyngeal abscess: <i>M. R. Yagoda, S. H. Selesnick</i> . . . . .	51
Acute bilateral vestibulo-cochlear dysfunction following occipital fracture: <i>M. R. Feneley, P. Murthy</i> . . . . .	54
Audiovestibular manifestations of the antiphospholipid syndrome: <i>T. Vyse, L. M. Luxon, M. J. Walport</i> . . . . .	57
Spontaneous regression of a symptomatic laryngopycocele: <i>S. Sütay, E. A. Guneri, M. U. Gunbay</i> . . . . .	60
An unusual cause of stridor in a neonate: <i>K. Kwong Fah, H. K. K. Tan</i> . . . . .	63
Uvulectomy to prevent throat infections: <i>B. E. J. Hartley, J. Rowe-Jones</i> . . . . .	65
A common carotid artery aneurysm causing severe dysphagia: <i>J. G. Rowe, A. A. Hosni</i> . . . . .	67
Bilateral pneumothorax after emergency tracheotomy: two case reports and a review of the literature: <i>F. Ameye, W. Mattelin, K. Ingels, R. Bradwell</i> . . . . .	69
Evidence for thyroid development from the fourth branchial pouch: <i>A. K. Ohri, S. K. Ohri, M. P. Singh</i> . . . . .	71
<b>Radiology in Focus</b>	
Acquired involution of the maxillary antrum: <i>B. U. Kumar, G. Naisby, L. M. Flood</i> . . . . .	74
<b>Pathology in Focus</b>	
True malignant mixed tumour of a minor salivary gland: <i>S. C. Toynton, M. J. Wilkins, H. T. Cook, N. D. S. Stafford</i> . . . . .	76
Adenocarcinoma arising in an oesophageal colonic interposition graft: <i>S. J. Lee, C. B. Koay, H. Thompson, A. R. Nicolaides, A. R. Das Gupta</i> . . . . .	80
<b>Abstract Selection</b> . . . . .	84
<b>Book Reviews</b> . . . . .	90
<b>General Notes</b> . . . . .	92