

THE  
JOURNAL OF LARYNGOLOGY,  
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*As we approach the Millennium I thought it would be interesting to see what our forebears were writing about 100 years ago. The Journal of Laryngology, Rhinology and Otology was then published by Rebman Publishing Company, Limited, 11 Adam Street, Strand, London, W.C.—Editor*

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## SHAPE OF THE CHEST.

THE state of the nose and naso-pharynx has a profound influence on the shape of the chest. Any interference with free nasal respiration, whether in the nose or naso-pharynx, in early life, will give rise to a characteristic deformity. Adenoid vegetations, as being the most common cause of defective nasal breathing, are usually found to be present. At one time it was thought that enlarged tonsils were the cause of this deformity, but the observations on which this view depended were mostly made in the pre-adenoid days, and as adenoids are almost invariably associated with enlarged tonsils, it is probable that the latter usually play quite a subordinate rôle in the production of the deformity in question. That enlarged tonsils alone are capable of causing deformity of the chest is shown by two cases reported by Dr. Norman Moore. He made a cyrtometrical drawing of the chest in each case before and some time after the removal of the tonsils, and the cup-shaped depression in the chest which was present before the operation was found to have disappeared when the second tracing was made.

My colleague Mr. Tubby has given an excellent representation of the changes seen in the thorax. If the adenoids or other causes of nasal obstruction are removed before the bones are firmly ossified the deformity may be almost completely cured, and recovery of the shape of the chest is accelerated by the judicious employment of extension and gymnastic exercises.