"HARD OF HEARING."

BY A FAMILY DOCTOR.



HERE'S ne'er an ill but there micht be a waur." A very old-fashioned proverb that, from a very old-fashioned country—a country first in every genuine reform nevertheless—a country that wears its "auld duds" till confident the new ones fit. It is a proverb that enjoins con-

tentment with our lot, that imparts courage under the minor misfortunes of life, that forbids us to fret, and helps us to carry a cheerful heart and countenance, when things seem dark and gloomy indeed. It is a proverb with which I have more than once stopped the nagging of an ungrateful patient. Ungrateful to Heaven, I mean, who has seen fit to afflict him only in the third degree—doubtless for his good—while hundreds around him were pining in poverty as well as pain.

I condoled with an old sailor the other day because he had only one leg. He was a cheerful sort of fellow, and I think a bit of a wag, for as he pocketed the penny I gave him—

"Half a loaf is better than no bread," he said, with a nod and a smile.

But what, you may ask, has all this got to do with deafness? I am coming to that straight. I myself, then, like millions more, am deaf—in one ear. But I do not go about with a grave face on that account. "There's ne'er an ill but there micht be a waur." I might be deaf in both. Yet the same proverb might be quoted by any one completely deaf. Has he not other senses left?

As it may be a caution to others what to avoid in order to retain complete hearing, I may as well state how I received my own disability. I jumped into a hansom one day in London, and told the fellow to drive me to a place which, though I did not know it, lay in an almost direct line five miles to the north. It blew a blizzard all the way. Would I have the window down? No, I preferred the fresh air. So I sat like a stoic in the teeth of the snow, pale, nursing my wrath at my own folly in not asking the distance, and angry at myself for being angry. At last I reached my journey's end, half frozen. All that day there was a singing in the right ear, and by next morning the hearing was gone. It is five years since, and there is still the same trouble. But mark that the causes were the exposure to the high, cold wind, and the excitement of my own fuming, which drove the blood to my head. I tried all ordinary remedies in vain. I ought to have gone to a specialist, but I put the "evil" day far off. The fact is, I was a little afraid, for expert aurists go through so many wonderful movements, blowing smoke through the head, boring with silver probes, turning and twisting, and, in a word, treating it as if it were the head of a violin, and the ears were the pegs, that I dreaded damage to the one sound organ.

At a review and sham fight some time after I met a friend, and naturally told him of my recent affliction. "Well," he said, "I should think being deaf was rather an advantage on a day of this sort."

But although he spoke in jest, there really are advantages and disadvantages in being deaf in one ear. The disadvantages are probably most disagreeably felt at table, when you may have to turn a deaf ear to the one you specially desire to be agreeable to. If this happens to be a lady, who has read your last book or admired your last picture, it is doubly disagreeable. There are two ways of getting over this: first you may screw your head round towards her till the chin rests on the shoulder, but this looks awkward; or you may turn the back of your head towards her, when, singular to say, you can hear all she says, but this would look doubly awkward, not to say ridiculous. Another disadvantage at table comes from the inability a semideaf person has of locating sounds. Some one has said a good thing, or some one from some part of the table has addressed you, but, for the life of you, you cannot tell which way to look in replying. There is this same disadvantage in the street. You hear a carriage coming rapidly along, and you want to get out of the way quickly, but you must look both ways before you start; your one ear will not tell you its direction.

The advantages, however, are not to be despised. Not more than half that is said in this world is worth listening to. That is consolatory. You can turn a deaf ear to all lingual disagreeablenesses. Even when induced to go to a lecture which turns out a delusion, you can lean your hearing side on your hand, and, while pretending to listen attentively, be alone in your own world thinking your own thoughts. But perhaps the chief advantage is this:—wherever you are at night you can obtain refreshing sleep. Dogs may bark, doors may bang, cocks may crow, hooters howl, and railway engine-drivers whistle out the whites of their own eyes, but they cannot annoy you. You are lying on your side, deaf ear uppermost, in dreamless, wholesome slumber.

But again the half-deaf individual has reason for thankfulness in remembering that, as a rule, the same causes that rendered him deaf in one ear might have deprived him of the use of both.

Nevertheless, I do not counsel the reader who becomes suddenly half-deaf to follow my example and neglect having the services of an expert aurist, if any such person practises within a reasonable distance. Much may be done—everything, in fact—if good treatment is had at the very commencement. Remember this, pray, or you may fall into evil, heartless hands: by an expert aurist I mean a thoroughly

qualified medical practitioner, who devotes his time to this branch of surgery. Their addresses, if unknown to you, can be had from your own family physician, who, however, will usually be able to put you to rights without your going to further expense.

It would take a much longer paper than I have space to write to describe the anatomy of the ear, and the pathology of the different kinds of deafness. It is a most intricate structure, fearfully and wonderfully made, and consisting of tubes external and internal, a drum, muscles, nerves, and bones of its own, all lying inside one of the hardest and strongest bones of the human body. This latter was specially designed by Nature to shield it from blows. It is supplied with air by a long tube called the eustachian, opening into the back part of the throat.

This tube I mention specially, to account for the fact of people becoming deaf through bad colds, or swelling of the tonsils. Observe that the ear must be supplied with air, or hearing becomes an impossibility. You hear this air crackling in the ear when you go through the process of swallowing the saliva. Well, if it is closed by the products of inflammation, or if it be shut up as to its mouth by the pressure of a swollen tonsil, it is obvious enough partial or complete deafness will be the result for the time being.

This is sometimes called throat deafness, and, like every other form of the complaint, requires special treatment. It is, perhaps, one of the commonest, if not the commonest kind. If caused by the pressure of the tonsil it is merely mechanical, and the remedy is removal of the cause. When, however, it is caused by the extension of inflammation of mucous membrane during a cold, it may or may not depart with the cold. It would then have to be seen to surgically, and the passing of a catheter might be necessary, a simple but delicate operation which only a professional man could be trusted to perform.

Another very common species of deafness is that caused by obstruction of the external tube of the ear with wax, which may be dissolved out or syringed out by a practised hand, when the cure would be complete.

If the drum of the ear be eaten through by ulceration, no permanent cure is of course to be expected, but a visit to a clever aurist may send the patient home rejoicing nevertheless.

There are inflammations of various other portions of the ear which I need not mention, all of which cause deafness. There is also a kind of deafness caused by paralysis of the nerves which carry the impression to the brain from the ear.

Many forms of the complaint are accompanied, especially at the outset, by disagreeable noises in the organ, or apparently in that part of the brain adjoining. It is as if one were actually listening to the rush of the blood through the vessels of the brain. I am not sure that it is not so, and that one cannot even judge of the state of his circulation by these sounds alone. Life's stream does not seem always to flow alike; at times it is but shallow, and we hear the water singing over its

pebbly bed, as a poet would say; at other times it is more full, and goes roaring and surging along; anon it appears to meet with an obstruction which causes it to bubble and hurtle and boil, till the obstruction be removed.

But this same singing in the ears may occur in those who are not deaf, and if it continues long, it is well to consult your physician, especially if you be fat and plethoric, for it may be an early symptom of apoplexy, or what is called "a stroke."

We often hear one friend say to another, "You're very deaf to-day," and perhaps the reply is, "Well, I am a bit deaf to-day, I vary with the weather." This is a species of deafness common in the nervous, and really arises from debility, consequent perhaps upon some temporary derangement of the digestive organs. People subject thereto should live carefully and abstemiously. They should try to live so as to be independent of the use of drugs.

I have heard it said that the deaf hear better when any noise is going on, probably because then other people are talking loudest. I really believe that is the true reason. But my grandfather used to relate an instance of the deaf colonel of a regiment who was so convinced of the truth of this opinion, that whenever he had to converse on parade with any of his men or officers, he used to have the drummer to beat up close alongside.

There is one affection of the ear which is of a very disagreeable kind, and which I must mention while I think of it: running from the ear. If the exuding matter were non-offensive it would be bad enough, but from being mingled, I suppose, with the secretion of wax, it is fetid. The most simple form is that occurring in children of a strumous diathesis, where it proceeds simply from the outer canal of the ear. It is not then dangerous in itself, and is remediable by great attention to health, and injections of an astringent and disinfectant nature applied by means of a little syringe.

And now having come nearly to the conclusion of my paper, what have I to say about the treatment of deafness? Very little, I fear. Were I talking to students it would be different; but the ear is such a delicate organ that in nine cases out of ten meddle-some domestic surgery makes matters worse. Each case must be treated on its own merits, and the sooner the better—simple cases by your own medical adviser, the more difficult by those men who make the ear a speciality.

But as prevention is better than cure, I may mention that no one should expose his ears to draughts, especially blizzards; that the less interference with the ear at all times the better; for example, picking the ear, or poking pins or penholders in it, does not conduce to contemplation; that wearing cotton wool in the ears is a stupid and dangerous practice, and more likely to induce cold than prevent it; that scrubbing the ear out of a morning with the corner of the towel is bad practice; and finally, that boxing a child on the ear may lead to permanent deafness.