적 검사된 93예에 대하여 시행한 청력 증진술의 방법 및 결과에 대하여 종합 발표하는 바이다.

4. 우리나라에 있어서의 耳硬化症에 대하여

순천향의대

소진명 ㆍ김형곤 ㆍ목정민

병리학 교실

강득용 • 이동화

耳硬化症은 靑少年期에 始作되어 점차적으로 聽力이 저하되며 전도성난청을 나타내는 것으로 **鐙**骨의 足板 의 병변 및 固定을 招來하는 질환이다.

本 敦室에서는 1978年 2月부터 1979年 3月까지 본이비인후과에 難聽을 主訴로 하여 來院한 患者中에서임상적으로 耳硬化粧으로 진단된 6例에 대하여 Stapedectomy를 시행하였는데 이의 病理學的 고찰을 문헌고찰과 함께 보고하는 바이다.

5. 학동기 아동의 Impedance Audiometry에 대한 연구

순천향의대

소진명・전승하・장혁순

1946년 Metz가 Impedance audiometry를 처음 임상에 응용한 이래 많은 연구가 진행되고 있다. Brooks, Jeger, Cooper 같은 학자들의 발표가 있었고, 최근 우리나라에서도 Impedance audiometry의 결과를 보고한 바가 있다.

금번 본 교실에서는 1977년 11월부터 1979년 2월까지 본병원 이비인후과 외래에 비폐색과 난청을 주소로하여 내원한 7세부터 16세까지의 학동기 아동 100명을 대상으로 집이경 검사와 Impedance Audiometry 를시행하여 Types of tympanogram, Static compliance 및 Acoustic reflex에 대한 연구결과를 문헌 고찰과함께 보고하는 바이다.

6. 蝸牛 受容器 毛細胞를 破壞한 家猫의 "電氣 蝸牛" 挿入에 依한 "聽覺感"

全南醫大

張寅源・金盛男・梁翰模・丁奎華・崔允浩丁鍾珍・趙容範・鞠兌津・李廷憲・廉時京

蜗牛 受容器의 毛細胞를 破壞한 家猫에서 "電氣 為 牛"의 內部 裝置를 中耳 骨胞內에 埋入한 後에 그 電 極을 鼓室階內에 揷入하고, "電氣 蜗牛"의 外部 裝置 에 曝露한 音響 刺戟에 對한 反應을 Electric Kymograph(Model 404 Harvard Apparastu Co.)에 描記하 여 다음과 같은 結果를 얻었다.

- 1) 音響 刺戟에 依하여 惹起되는 家猫의 耳介運動의 크기는 特定한 範圍 안에서 刺戟의 强度와 平行하였다.
- 2) 反復 音響 刺戟에 依한 耳介反射運動은 最初의 刺戟에 對해서는 若干 增大한 後, 점차 減少하는 傾向 이 있었다.
- 3) 音響 刺戟에 依하여 惹起되는 耳介運動은, 絕對不應期, 比較的 不應期 및 反應期 等이 觀察되었다.
- 4) 音響 刺戟에 依하여 惹起되는 實驗 家猫의 耳介 反射는 聽受容器 毛細胞를 破壞한 後 "電氣 蝸牛"의 挿入에 依하여 "聽覺感"이 惹起되고 있음을 示唆한다.

7. 만성중이염의 교실내 병변과 청력에 관한 임 상적 연구

부산의대

박동석 • 전재기

만성중이염은 이비인후과 영역에 있어서 가장 빈도가 높은 질병중의 하나이며 항생물질 및 화학요법 등 많은 의학의 발달이 있음에도 불구하고 본 진환의 근본적인 치료법으로는 수술요법 밖에 없는 실정이다.

만성중이염의 수술요법은 중이화농의 제거를 위한 근치수술에서 부터 시작되어 근년에 이르러서는 중이 염의 제거는 물론 청력개선을 도모하는 소위 고실성형 술이 발달하였다.

고실성형술의 술식에 따른 수술후 청력 개선에 관해 서는 학자들의 많은 연구가 있으나 술전 청력과 고실 내 상태와의 관계는 언급이 적다.

저자들은 술전 청력상으로 중이내 병변의 종류와 정 도를 추정할 수 없을가 하는 문제와 전음기구의 기초 een cholesteatoma and non-cholesteatoma group revealed significant t ratio (p 0.01) only in 2KHz and 4KHz. No significant differency was observed in mean bone conduction.

6) In a histopathological study of natural otitis media in guinea pig, we observed inflammatory infiltration of the round window membrane, serofibrinous precipitate in the scala tympani, and degeneration of the organ of Corti most significant near the basal turn. These changes would explain high tone bone conduction loss in the process of chronic otitis media.

3) Hearing Improvement by Ossicular Reconstruction

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Since 1968, we have performed intact canal wall tympanoplasty with mastoidectomy and reported its methods and results on several occasions.

We also reported ossicular reconstruction for hearing improvement after intact canal wall tympanoplasty with mastoidectomy.

Many problems were noticed, so several variable operation methods were performed.

This paper deals with the following: A checked up of hearing progress after ossicular reconstruction with a 93 cases out of a total 153 cases who had undergone this operation.

This covered a period of January, 1973 to February, 1979 in our Department of Otolaryngology.

4) Otosclerosis in Korea

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Otosclerosis is correctly termed otospongiosis progressiva insidiosa or more briefly otospongiosis. It consists of one or several circumscribed area of new, vascular, songy bone which is less dense and less sclerotic than the petrous bone of the normal labyrinthine capsule that it replaces. Clinically it causes progressive or sensorineural in nature. It occurs most commonly in middle aged adult.

Authors analysed the cases which is thought otosclerosis clinically, and stapedectomy was performed for the purpose of therapy and pathological confirmation.

This paper is dealt with its case study aswell as pathological discussion and its literature analysis.

5) Impedance Audiometry in Children

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Since Metz had employed the impedance audiometry in 1946, scholars have carried out many investigation.

Brook, Jeger, Cooper reported and evaluated the clinical studies of impedance audiometry and its screening test. Recently, in Korea, a studies of impedance audiometry have been reported.

We analysed 100 children aged between 7—16 years old who visited OPD of E.N.T. department with the complaints of the nasal obstruction and hard of hearing from Nov. 77-Feb. 79.

Through the use of otoscope and impedance audiometry, we evaluated the types of tympanogram, static compliance and the acoustic reflex.

This paper is dealing with the statistical study of impedance audiometric result and its literature.

6) "Auditory Sensation" by the Inserted "Electronic Cochlea" in the Cases of the Experimentally Destroyed Receptor Organ of Corti of the Cat

In Won Chang, M.D., Sung Nam Kim, M.D., Han Mo Ryang, M.D., Kyu Ha Chung, M.D., Yun Ho Choi, M.D., Yong Bum Cho, M.D., Chong Chin Chung, M.D., Chung Hun Lee M.D., Shi Kynng Yeom, M.D., Tae Chin Kook, M.D.

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In the cases of the experimentally destroyed receptor organ of the Corti of the cats, "electric cochlea" were inserted near the auditory neuron through the Scala tympani as an input of the inner device, and outer device is placed near the receiver of the audiometer.

During exposing noise through the outer device, kymographic record were obtained as following:

- 1) Correlation between increasing intensity and amplitude showed parallel responses
 - 2) The auricular reflex by repeated stimu-

lation of the sound showed considerable increase at first, and decrease respectively.

- 3) In this experimental animals, absolutely non-responsed period, relatively non-responsed period and responsed period were observed.
- 4) Above mentioned reflex indicate that "Auditory sensation" can be induced by inserted "Electric cochlea" in the cases of the experimentally destroyed receptor organ of Corti of the cats.

7) A Clinical Study of Hearing Disturbance and Middle Ear Pathology in Chronic Otitis Media

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The degree of hearing impairment of chronic otitis media will indicate the nature and severity of middle ear pathology especially condition of ossicular chain, size of ear drum perforation and location of granulation tissue in the middle ear cavity.

The subjects were 189 ears of tympanoplasty for chronic otitis media and divided into four groups as follows: Normal ossicular chain with only ear drum perforation (group I), normal ossicular chain with granulation tissue only around the ossicles regardless of any other region (group I), ossicular ankylosis or fixation of handle of malleus to promontory with or without granulation tissue around the ossicle (group II) and ossicular interruption by partial or complete destruction(groupf IV).

The results were concluded as follows: