

個月이었으며 2~6個月이 56例(44.0%)로 가장 많았고 6個月~2년이 34例(24%), 2個月 이내가 17例(13.4%)였다. 3年以上은 15例(11.8%)였다.

4. 組織生檢部位는 眞聲帶가 76例(53.5%)였으며 假聲帶가 23例(16.2%), 喉頭蓋가 19例(13.3%)였고, 그 외에 披裂軟骨部, 前連合, 聲門下域의 順이었다.

5. 組織生檢結果는 惡性腫瘍이 69例(48.6%), 喉頭結節 20例(14.0%), 喉頭乳頭腫 15例(10.5%), 喉頭結核 12例(8.4%)였으며, 기타의 良性腫瘍이 15例(10.6%), 非特異性炎症이 7例(5.0%)의 順이었다.

6. 惡性腫瘍을 의심하였으나 非特異性炎症이나 喉頭結核등으로 判明된 경우가 13.4%였다.

11. 嚥下困難을 主所. 來院한 患者의 臨床 統計의 考察

서울醫大

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嚥下困難은 疾病이나 機能障碼의 出現을 나타내는 症勢로서 原因 및 發生部位가 다양하다. 1977年度 1年間 서울大學病院 耳鼻咽喉科 外來에 嚥下困難을 主訴로 來院한 133名의 患者를 臨床統計의으로 考察하여 다음과 같은 結果를 얻었다.

1. 嚥下困難을 主訴로 來院한 患者는 全體 耳鼻咽喉科 外來 來院患者 9313名의 2.1%에 該當한다.

2. 性別男女의 比는 1.3:1로 男子가 약간 많았고, 平均年齡은 35.7歲이다.

3. 自覺症狀의 持續期間은 平均 251日이나, 1年 以上의 食道腐蝕症 8例를 除外하면 平均 40日이다. 좀 더 자세히 分類하면 1週 以下 67例(50.4%), 1週~1個月 24例(18.0%), 1個月~1年 34例(25.6%), 1年 以上 8例(6.0%)로 나타났다.

4. 發生部位別로 보면 食道 27例(20.3%)보다 口腔—咽頭—喉頭 등이 106例(79.3%)로 約 4배가 된다.

5. 原因의 要素를 보면 炎症性 67例(50.4%), 腫瘍性 28例(21.0%), 腐蝕劑의 誤嚥事故 14例(10.5%), 異物 11例(8.3%)등의 順이다.

6. 疾病別로 보면 咽頭炎 및 扁桃炎 42例(31.6%), 食道腐蝕症 14例(10.5%), 口內炎 14例(10.5%), 喉頭腫瘍 12例(9.0%), 扁桃周圍膿瘍 9例(9.8%), 食道異物 7例(5.2%), 舌腫瘍 7例(5.2%), 扁桃腫瘍 6例(4.5%), 咽頭異物 4例(3.0%)등의 順이다.

12. 聲門下部에 發生한 Granular Cell Myoblastoma 1例

서울의대

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Granular Cell Myoblastoma는 筋肉에 發生하는 극히 드문 腫瘍으로 1931年 Ahrikossott 氏가 聲帶에서 發生한 것을 처음으로 보고 하였다.

好發部位는 舌이며 그外 口腔의 다른 部位나 喉頭, 氣管에 생길 수 있다.

이 疾患은 그 上部粘膜炎의 假性上皮增殖이 同伴되는 수가 많으므로 惡性腫瘍으로 혼동되기 쉬운 점 때문에 臨床의으로 중요하다.

著者들은 17세된 女子로서 3年間 계속된 嘎聲을 主訴로 來院하여 手術받은 聲門下部의 granular cell myoblastoma 1例를 經驗하였기에 文獻考察과 더불어 報告하는 바이다.

13. 喉頭に 發生한 原發性 惡性淋巴腫 1例

서울의대

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喉頭に 發生하는 惡性淋巴腫은 극히 드물며 특히 原發性인 경우는 더욱 드물다.

1934年 Mackenty 가 처음 喉頭的 惡性淋巴腫을 보고한 이래 28例가 보고 되었다. 그中 原發性인 경우는 8例 이었으며 아직 國內에서는 보고된 바 없다. 著者들은 呼吸困難과 嚥下障碼를 主訴로 來院하여 喉頭的 原發性 惡性淋巴腫으로 診斷된 10세 男子患者를 經驗하였기에 文獻考察과 더불어 報告하는 바이다.

14. 성대결절적출전후의 음성기능에 관한 임상적 연구

梨花醫大

文 英 一

1974년 5월부터 1977년 4월까지 만 3년간 이화여자 대학교 의과대학 이비인후과 외래에 내원하여 간접후

quency.

3. Biopsy sites were as following in frequency:

Rt. upper lobe, Lt. main bronchus,

Lt. upper lobe,

Rt. main bronchus, Lt. lower lobe.

4. The final diagnosis of biopsied cases were cancer 80%, tuberculosis 15%, and malignant mesothelioma, anthracosis, aspergillosis, were one case each.

5. Among 57 case of lung cancer, biopsy confirmed cases were 36 cases (63%).

6. Pathologic finding of 36 case of Biopsy confirmed lung cancer was as following:

Squamous cell ca : 64% Anaplastic ca : 25%

Adeno ca : 2.8% Unclassified : 2.8%

7. Bronchographies were done in 36 cases (51%), one quarter of cases before biopsy, and three quarters of cases after biopsy.

8. Cytology was requested in 76% of cases with following results:

PAP class V 15%, class IV 7.5%, class III 1.8%.

10. A Clinico-Statistical Study of the Biopsy Result of the Larynx

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The prognosis of the laryngeal diseases is highly dependent on the early diagnosis and treatment. The biopsy finding is inevitable for the confirmed diagnosis. A clinico-statistical survey of the biopsy result of the larynx in 142 cases was done at the Department of the Otolaryngology Seoul National University Hospital during a period of 3 yrs from 1973 to 1975.

Results are as follows

1. Of the 142 cases, 109 cases (76.8%) were males and 33 cases (23.2%) females. Sex ratio was 3.3 : 1.

2. Age distribution shows 41 cases (28.8%) in 5th decade, 41 cases (28.9%) in 6th decade.

3. Chief complaint was hoarseness 127 cases (89.4%), dysphagia 7 cases (4.9%) and sore throat, dyspnea etc. The time lag from the onset of hoarseness to the hospital was 2~6 Months, 56 cases (44.0%), 6 Months~1 yrs, 34 cases (24%), within 2 Months, 17 cases (13.4%) and 15 cases (11.8%) were over 3yrs. Average time lag was 8.1 Months.

4. The site of laryngeal biopsy was 76 cases (53.3%) from true vocal cord, 23 cases (16.2%) from false vocal cord, and 19 cases (13.3%) from epiglottitis.

5. Biopsy result was carcinoma in 69 cases (48.6%), laryngeal nodule in 20 cases (14.0%), laryngeal tuberculosis in 12 cases (8.4%) and non specific inflammation in 7 cases (5.0%).

6. 13.4% of the clinically impressed laryngeal carcinoma proved to be laryngeal tuberculosis, non-specific inflammation etc.

11. The Clinico-Statistical Analysis of Dysphagia

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Dysphagia or difficulty in swallowing is a symptom which indicates the presence of disease or dysfunction.

Because the cause & the original site are variable, it is significant to study the clinicostatistical analysis on 133 cases with complaint of dysphagia during the last one year in the department of Otolaryngology, College of Medicine, Seoul National University.

The results are as follows:

1) Among the total O.P.D. patients (6313 cases), patients complaining the dysphagia are 2.1%.

2) Male to female sex ratio is 1.3 to 1, slightly predominant in male and average are 35.7 years.

3) The duration of chief complaint is about 251 days in average, but excluding the 8 cases with more than year of symptom, it is about 40 days. In detailed analysis of the duration: 67 cases (50.4%) occurred within 1 week: 24 cases (18.0%), 1 week

to 1 month: 34 cases (25.6%), 1 month to 1 year: 8 cases (6.0%), more than 1 year.

4) As to the site of origin, the oropharyngolaryngeal origin 106 cases (76.7%) are 4 times as many as the esophageal origin 27 cases (20.3%).

5) As to the etiological classification: inflammation 67 cases (50.4%), tumor 28 cases (21.0%), corrosive agent 14 cases (10.5%), foreign body 11 cases (8.3%) in order.

6) As to the disease entity: pharyngitis and tonsillitis 42 cases (31.6%), stomatitis 14 cases (10.5%), corrosive esophagitis 14 cases (10.5%), laryngeal tumor 12 cases (9.0%), peritonsillar abscess 9 cases (6.8%), esophageal foreign body 7 cases (5.2%), tongue tumor 7 cases (5.2%), tonsillar tumor 6 cases (4.5%), (pharyngeal foreign body 4 cases (3.0%) in order.

12. A Case of Subglottic Granular cell myoblastoma

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Granular cell myoblastoma is a rare muscular originated benign tumor which was first described on the vocal cord by Abrikossoff in 1931.

Although this lesion is found frequently in the tongue, it has been known to occur in other parts of the oral cavity as well as in the larynx and trachea. It is of considerable clinical importance that this lesion is frequently accompanied by pseudoe-pitheliomatous hyperplasia of the overlying mucosa which may easily be confused with carcinoma. We experienced a case of granular cell myoblastoma and report with the consideration of literatures concerning the same disease.

13. A Case of Malignant Lymphoma of the Larynx

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The purpose of this paper is to review the literature concerning the occurrence of malignant lymphoma of the larynx and to add a case.

Mackenty was the first to report a case of malignant lymphoma involving the larynx, 1934. After then 28 cases were reported of which 8 were described as primary in the larynx. Yet no case was reported in our nation.

We experienced a case of primary malignant lymphoma of the larynx in 10 years old male and report with consideration of literature concerning the same disease.

14. Clinical Study on Phonatory Function of Pre and Post-Operative Condition of Vocal Nodules

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The author has experienced 50 cases of vocal nodules and polyps in our department for 3 years from May 1974 to April 1977. These nodules were removed out with laryngeal forcep under indirect laryngoscopy and maximum phonation time and timbre of the voice were analyzed before and after operation. Very shortened phonation time of the patient with vocal nodule has returned to normal range (Male : 30 seconds, Female : 20 seconds) and the voice timbre has recovered to almost normal voice postoperatively.

The author has made a brief literature review.