A CASE
OF
INGUINAL ANEURISM

SUCCESSFULLY TREATED,
BY TYING THE EXTERNAL ILIAC ARTERY.

By EDWARD SALMON, Esq.

SURGEON TO THE FIRST BATTALION OF THE THIRD REGIMENT OF GUARDS.

COMMUNICATED BY
MR. EARLE.

Read March 20, 1821.

THOMAS BROAD, aged 29 years, a private in the third regiment of Guards, was brought to the hospital in September, 1820, with an aneurism in the groin, extending to Poupart's ligament. From his own account, it had been ten months in acquiring this magnitude.

I performed the operation of tying the external iliac artery on the 12th of September, making an incision through the integuments, three inches and a half in length, beginning above the spine of the ilium, and continuing it to the base of the tumor. The aponeurosis of the external oblique muscle being brought into view, was divided to the same extent, and in the direction of the external incision. The internal oblique, and the transverse

muscles, were divided with a probe-pointed bistoury, to the extent of an inch and a half. With great care I pushed aside the bag of the peritoneum, by which means, I was enabled to introduce my finger down so as to feel the external iliac artery beating under it. I endeavoured to separate the vessel, but could not succeed, either with my finger, or the point of the aneurismal needle. With a scalpel, therefore, I made an incision on each side of it, and then passed a strong ligature underneath it, taking care to include nothing but the vessel, and tied it firmly. The pulsation in the tumour instantly ceased, the edges of the wound were brought together, with a suture in the middle, and straps of adhesive plaster.

After the operation, the patient complained of some little pain in the abdomen, which subsided in the evening. An opiate was then given, and the diet was restricted to bread and tea.

Sept. 13th.—He had a quiet night, slept five hours; pulse 112; no difference of heat in the extremities. In the evening complained of great flatulence; there was also tension of the abdomen, for which he was ordered an opening medicine, not having had any stool during the day.

14th.—Had a restless night with griping, and no stool. The opening medicine was repeated, from

which he had two stools, and was greatly relieved; pulse 96.

15th.—Slept five hours; had four stools; no pain in the abdomen; pulse 88. This day the dressings were removed, the incision had united.

16th.—He passed a good night; skin cool; no pain; pulse 80.

19th.—Complains of uneasiness in the upper part of the incision, which has become disunited, and discharges sanies mixed with pus. Every other symptom most favourable.

20th.—The discharge of pus considerable, and of bad consistence. There being much debility and a weak pulse, he was ordered decoction of cinchona, with diluted sulphuric acid, three times a day. His diet was also increased.

From this period his health improved; the pus became of better quality, and less in quantity. The tumor was much smaller, and undergoing rapid absorption.

The ligature came away three weeks after the operation, when the wound had nearly healed. The man was kept in the hospital two months, when he was discharged in perfect health, with the free use of the limb, and hardly any remains of the tumor.

Although many successful cases of tying the external iliac artery in femoral aneurism have already been published, yet every additional one, attended with such decided success as the present, and occasioning so little disturbance to the system, may have the good effect of giving greater confidence to practitioners.

*January 22nd, 1821,
Regent Street.*