A
CASE
OF
BRONCHOTOMY,
SUCCESSFULLY PERFORMED
FOR THE
REMOVAL OF A PEBBLE FROM THE TRACHEA.
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OF DARTMOUTH.

COMMUNICATED
By HENRY EARLE, Esq.

Read Nov. 13, 1821.

CHARLES HORNE, a boy four years old, with a short fat neck, on the day of the coronation, fell with several pebbles in his mouth. One of them was drawn into the rima glottidis, where it stuck, nearly occasioning suffocation. This was prevented by a young lady, who, with great presence of mind, instantly introduced her finger into the child's mouth, and felt the stone, which she attempted to remove ; but in the attempt it was forced into the trachea. In this state I found my patient, two hours after the accident. The child was so tranquil, and playing with his toys, with easy breathing, that I at first doubted whether the pebble was in the wind-pipe or not, until I made him cough, when its situation was too evident, from the convulsions and almost suffocation which it produced, attended with wheezing

and rattling in the throat. The stone being small, it returned to the bottom of the trachea, after the coughing ceased; he was then restored from apparently instant suffocation to almost tranquil and easy breathing. *R Muc. gummi acaciæ ʒiiss. Tinct. opii gtt. xx. Syr. simplicis ʒij. M.f. mistura, capiat cochleare minimum sæpe, tussi urgente.* This mixture produced so good an effect in allaying the irritation and cough, that he passed a good night; and, in the morning when I visited him, no one could have imagined that any thing was lodged in the trachea. In the course of the day, the pebble was often forced up by the cough so near the grasp of the glottis, that there was frequent danger of suffocation. A consultation of my surgical brethren was summoned to consider the propriety of an operation, who all, unâ voce, recommended it to be performed, as the stone was now coughed up so often to the sensible glottis, that the internal membrane of the wind-pipe became inflamed, and there was a copious expectoration of yellow mucus.

With the assistance of the attending surgeons I performed it in the following manner:—The child being laid on a table with his head hanging over it, and being firmly held by the assistants, I made an incision through the integuments, two inches and a half long, near the prominence of the thyroid cartilage. On dissecting down to the trachea, a considerable vessel was opened, which required the application of a ligature.

An incision, very little more than half an inch long, was made in the trachea, beginning from the first ring under the cricoid cartilage, when I most fortunately felt the pebble with the point of the knife, having fixed it with the fore finger of my left hand to prevent its being drawn out of reach by an inspiration. Mr. Budland, one of the attending surgeons, with a pair of forceps easily extracted it; it was of the shape of a kidney-bean, half an inch long, $\frac{3}{8}$ of an inch wide, and a quarter of an inch thick. As soon as the wound was dressed, the child was put to bed, and directed to take the anodyne mixture as before.

Saturday, July 21.—Passed a good night, with very little cough, the breath passing occasionally through the aperture, especially when he coughed; pulse 120. The bowels being confined, an emollient injection was thrown up, which brought off some hardened fæces. At noon, pulse 140; his breathing quick and laborious, with convulsive twitchings of his hands and arms, and breathing constantly through the wound. I bled him *ad deliquium animi*, which gave him some relief. R Mannæ 5j. Infus-sennæ 3ss. Tinct.colchicigr.x.f.haustustertiâquâque horâ sumendus. Eight o'clock, P. M. the quickness of his breathing had now become stridulous, the cough and convulsive twitchings were more violent than at noon, with a pulse so rapid as scarcely to be counted, and with the additional symptom of tightness on the chest, showing that the inflamma-

tion had extended into his lungs. The aperient draught having as yet had no effect, the bleeding was repeated. I opened a vein on the back of his hand, near the wrist, immersing the hand and arm into warm water; it bled rapidly, until he again fainted, which gave instant and permanent relief for that night.—*Sterno emplastrum lyttæ amplum imponatur.*—*R. Syrup Rhamni cathartic. ʒij. Infus. sennæ ʒij. Tinct. colchici gtt. xxxx.*—*f. mistura capt. coch. largum, quartis horis, donec fluxerit alvus.*

Sunday, 22d. nine in the morning.—Passed a very comfortable night; several copious offensive stools passed off about one o'clock in the morning, after taking the second dose of the mixture; pulse 130; still breathing through the aperture. Noon.—The dressings getting loose were removed, the lips of the wound were found in contact, but not adhering, on account of the frothy sputa being constantly forced through it at every expiration. Seven in the evening.—He has had two hours' quiet sleep, pulse 130,—*R. Tinct. digitalis.*—*Tinct. colchici aā gtt. xx.*—*Muc. gummi acaciæ.*—*Aquæ, aā ʒvj. Syr. rheados ʒi.*—*M. f. mistura, capt. quartam partem, quartis horis.*

Monday, 23d.—Passed a tolerably quiet night; cough rather troublesome, the breathing more easy, no alvine discharge since yesterday morning.—*Repetatur mistura aperiens, alvo dejecta, continetur mistura ex tinct. colchici et digitalis heri præ-*

script. Noon.—The wound was again dressed, the breath still passing through it at each expiration, pulse 120: the bowels were relieved by two doses of the aperient mixture, the blister acted well, yet the breathing was rather more oppressive than in the morning; the child was restless and distressed. In the evening, pulse 130, and all his symptoms growing worse, a vein in the other hand was opened, and being immersed into warm water, bled well. I did not suffer it to bleed so long as to make the child quite faint, and therefore stopped it as soon as his lips became a little pale; this third bleeding had as good an effect as the two former ones, and was immediately succeeded by a copious purging stool. —*Continuetur mistura colchici et digitalis, quartis horis.*

Tuesday, 24th.—Passed a very good night, and is in every respect much better, but very weak; the air still passing through the aperture, and with violence, when he coughed. The mucus expectorated became thick and yellow, the breathing was greatly relieved, and he seemed to cough without pain; the wound looked well.—*Continuetur mistura e tinct. colchici et digitalis, et mistura aperiens pro re ratâ.* From this time to the 27th, there was no material alteration, but on this day the air ceased to pass through the wound: 28th, a more generous diet was allowed, he being much reduced by the repeated bleedings, &c.—*Omittantur medicamenta.* He progressively gained

strength, and the wound nearly filled up, still having a trifling cough, with some expectoration. On the first of August he was in a very bad temper, and crying violently; the edges of the wound again separated, but I was much pleased to find that no air passed through the wound, which soon after got into a healthy state, and is now quite cicatrized. The boy has a good appetite, and seems in every respect well.

Dartmouth, 13th August, 1821.

Observations on the preceding Case, by
HENRY EARLE, Esq.

In the course of last Autumn, I had an opportunity of seeing the subject of the preceding paper; and considering the case as one which deserved to be recorded, I requested the author to draw it up for the Society. It appeared to me to possess considerable interest in illustrating the different degrees of sensibility between the larynx and the trachea; and in explaining, in a satisfactory manner, the great urgency of the symptoms, and the imminent danger which attends cynanche laryngea. As a valuable additional fact in support of the practice, which was so ably pursued, I felt anxious that the case should not be consigned to oblivion; more particularly as I am