ON THE INFLUENCE OF
LOCAL IRRITATION,
IN THE PRODUCTION OF DISEASES RESEMBLING
CANCER
AND OTHER MORBID
ALTERATIONS OF STRUCTURE.

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THERE are few more trying situations in which a surgeon, anxious to fulfil his duty, can be placed, than when called upon to decide on the propriety of subjecting his patient to a painful and perhaps hazardous operation, the result of which must, from the very nature of the case, be extremely doubtful. On the one hand, humanity pleads most powerfully against increasing the sufferings of a fellow-creature, without some reasonable prospect of affording lasting benefit ; whilst, on the other hand, the cruelty of abandoning him to his fate, without hope or remedy, and thus perhaps sacrificing a valuable life, may be urged with equal if not superior force. This anxious and most painful alternative applies not only to cases of extensive mechanical injury,

where we are often called upon, without any previous knowledge of the powers of the constitution, to decide between mutilation and probable destruction, but likewise to cases, which, from their progress and character, bear a close resemblance to those malignant affections, which experience teaches us are too deeply rooted in the constitution to be eradicated by any local operation. It is to the latter description of cases that I wish to call the attention of the Society.

Much has been done of late years by many eminent pathologists, in assisting us to discriminate between these diseases, and in many instances, the characters are so well defined, and the constitutional derangement so manifest, that we are enabled to form a tolerably correct prognosis of the probable issue. The almost certain recurrence, or co-existence of disease in remote parts of the body, and particularly in some vital organ, which so constantly happens in fungoid affections, after the local complaint has been freely and completely removed, has induced many practitioners to decline operating altogether. My own experience, and the extensive opportunities I have had of witnessing the practice of others, in these lamentable cases, have convinced me that such a decision is highly honorable to the profession, and is best calculated to rescue it from opprobrium.

The same observations will hold good in most cases of carcinoma, where the constitution is evi-

dently tainted, although in these latter cases it may sometimes be expedient to obtain temporary ease, and a prolongation of life, by the infliction of a tractable wound, with a view to remove or prevent one, which will inevitably lead to a premature and painful termination of existence.

Not unfrequently however, we meet with instances of disease, which, although at first sight they may put on so malignant an aspect, as at once to deter us from proposing any operation, yet, on closer enquiry into the history of such cases, we shall often find that the morbid action has been first excited by some *local* irritation, and subsequently maintained by *local* circumstances. In some of these cases, the constitution may be previously disposed to disease, but in many it is only affected by the continual pain and excitement produced by the local affection. Having met with several instances of this description in which patients have been rescued from the gradual inroads of a lingering disease, and perfectly restored by extirpation of the local malady, I propose in the following pages to adduce some of these cases, and to point out certain circumstances which have not met with the attention they merit, although they will be found materially to influence the characters of disease. From the experience I have already had, I feel convinced that, by early directing our views to counteract the influence of local irritation, we may often succeed in restoring healthy action; whilst, in more advanced stages of disease,

we may be induced to resort to operations with far greater confidence of success than the appearance and progress of the complaint would warrant, independently of any such exciting causes.

On Diseases of the Lips.

When any morbid action takes place in the immediate vicinity of one of the external apertures of the body which are concerned in the necessary operations of ingestion or excretion, they are from that circumstance alone particularly liable to assume an indurated unhealthy aspect from the continual irritation to which they are subjected in the diurnal performance of these several functions. Thus any ulcerations about the mouth will often be extremely difficult to cure, and, if neglected, will assume the induration and other characters of carcinoma*. When this occurs in advanced life, and has existed for some time, so as to include any considerable portion of surrounding integument, it will generally exhibit a very unpromising aspect, and induce the surgeon to form a most unfavorable

* Induration appears to be the result of chronic, or in some cases of subacute inflammation causing interstitial deposit. A familiar illustration of the effect of irritation in producing induration is often afforded by herpes præputialis, and common excoriation of the prepuce, when improperly treated with stimulating applications. I have many times seen such cases assume all the hardness and other characteristic marks of chancre, which have readily subsided and healed under a more mild plan of treatment.

prognosis. The continual irritation, arising from the introduction of food, the effort of speaking, and the constant flow of saliva, are sufficient to keep up the morbid disposition, and to prevent any reparative effort of nature from being carried into effect. After a time, the neighbouring glands will often become enlarged, which confirms the surgeon in the opinion he had been induced to form of the nature of the affection. It has fallen to my lot to see several of these diseases about the lips, and from the result in all but one case, I am led to believe that they are not carcinomatous, or dependent on any constitutional disease, but arising from the continual local irritation above alluded to. If taken early, I have no doubt that many such cases may admit of being cured by the rigid discipline, of which I shall hereafter have occasion to speak; commonly, however, they do not fall under the eye of the surgeon until they have made considerable progress, when it is both safer and better to remove the disease, which the yielding nature of the parietes of the mouth will readily admit of to a very considerable extent without any proportionate deformity. I shall briefly mention the particulars of such a case.

Mr. H. Webb, a native of the West Indies, aged 64, called on me in June 1816, to consult me respecting a disease at the angle of his mouth, which had commenced in Dec. 1814, with an induration which soon ulcerated, and had continued to make

progress, unchecked by any application. During the whole of this period he had resided in the Bahama Isles. At the time of his calling upon me, the right angle of the mouth had ulcerated so far as to allow the lip to fall and to admit of a constant flow of saliva. The ulcer had a very irritable appearance, and occasionally bled, and around this, to a considerable extent, the cheek had a very firm scirrhus feel, and the glands under the jaw were enlarged. He suffered constant severe pain, and was scarcely able to introduce any food into his mouth, from the swollen state of the lips, and the pain it caused him. The discharge had a most fetid smell, and affected his breath so much as to make it very unpleasant to be near him. On minutely examining the part, it appeared to me possible to remove the whole of the disease, and by taking away the teeth in the lower jaw, which were rendered useless by the loss of all the corresponding ones in the upper, that the cheek and remaining portion of the lips might be brought into contact. I represented to him that I could not answer for the success of this operation, that every thing would depend on being able to obtain union by the first intention, and that if we failed in this, it was more than probable the wound would never heal : I further stated that if we succeeded in closing the wound, the relief might only be temporary. Still, however, I entertained hopes of a more prosperous termination. I recommended him not to abide by my decision, but to take the opinion of other sur-

geons. He applied to two of the ablest and most experienced in town, who both declined attempting any operation, in consequence of his age, and the progress of the complaint, which they both considered as confirmed cancer. He returned to me, and told me what had passed, adding, at the same time, that he was willing to submit to any trial, however slight the chance of success; that I offered him a possibility of recovery, and the other gentlemen left him no alternative but to linger on a little longer, a disgusting object to others, and loathsome to himself. I requested him to take further opinions, but this he declined. On sending him to an eminent dentist, to remove the teeth in the lower jaw, that gentleman was unwilling to touch them, conceiving that the gums, which were very spongy, had taken the same diseased action. I mention these circumstances with a view to prove the malignant character of this disease.

On the 28th of June, I removed the whole of the diseased skin, including the angle of the mouth with a large portion of each lip, together with a considerable part of the cheek. Previously to this operation, I removed five teeth, which materially contributed to the success of the case, both by allowing the cut edges to come more closely into contact, and by removing the possibility of their projecting and interrupting the healing of the wound. It was necessary to tie two very considerable vessels, but by employing fine silk ligatures, and

cutting them off close to the knot, they did not interfere. This circumstance deserves notice, as it is very probable that if the ligatures had been suffered to hang out of the wound, they would have acted as a conduit for the saliva, and would have prevented its union. The parts were brought together with four hare-lip pins, two to the upper, and two to the lower lip ; and the wound was further approximated and supported by a hare-lip bandage, made with very fine ribbon instead of thread. On examining the part after removal, it had the firm white bands, and other characters of carcinoma.

After the operation I would not permit him to speak a word, nor attempt to drink, except when I fed him with an elastic gum bottle and tube. Nothing sinister occurred during the treatment ; the whole healed by the first intention, and in ten days he was sufficiently restored to leave his house. The glands under the jaw soon subsided, and never again became enlarged. I am happy in being able to add, that I have within the last month, heard from him, and he has continued to enjoy his health since that time. The degree of deformity is far less than could have been expected, and the aperture of the mouth is quite sufficiently large for him to take food without the least difficulty.

The happy termination of this case certainly far exceeded what could, *a priori*, have been expected. To some gentlemen, my conduct in this instance

may appear to merit the charge of temerity, unless they will admit that *Exitus acta probat*. In four cases of less extensive disease of the lower lip, having all the same threatening aspect, I have removed the part with perfect success. In one of these cases, the diseased action appeared to have been first induced by the irritation of a tobacco pipe, as the patient, who was a sailor, was so inveterate a smoker, that he had caused a portion of two of his incisors to be filed away for the convenience of introducing the pipe into his mouth. The disease commenced immediately opposite this opening. In another case the gentleman traced it to a blow he had received on the mouth, which caused a slight circumscribed effusion of blood, which remained indurated and without pain for many months. He had contracted a habit of drawing this portion within his teeth, and very frequently inadvertently bruised it: after a time, ulceration took place, and a very angry looking fungus sprung up, which his medical attendant had attempted to destroy by caustic applications; but these only aggravated the disease, and increased the surrounding hardness.

In one case, in which the whole of the lower lip was removed, the result was unfortunate, as the disease recurred in the sublingual glands, and rapidly destroyed the sufferer. In this case I had formed a new lip, sufficiently deep to restrain the flow of saliva, by separating the integuments from

the front of the lower jaw, and keeping the wounded surfaces apart until the whole had skinned over.

From my own experience, and from witnessing the success of others, I may venture to affirm, that few cases afford greater promise of success than those corroding ulcers, with scirrhus edges, which occur about the lip. The operation is so simple, and the wound so constantly unites by the first intention, that in cases that do not readily yield to local and constitutional treatment, it is far better to resort to it, and often the deformity will be less than when the ulceration heals without any operation. One circumstance may be worth advertising to, both in operating for the removal of a diseased portion of lip, and in the hare-lip operation. It is better to introduce first, the pin that is nearest the edge of the lip, the exact coaptation of the red margin of the lip is thus rendered more certain, and where this is nicely attended to, it is hardly possible, at a slight distance, to perceive that any operation has been performed.

Before concluding this section of the subject, it may be mentioned, in corroboration of my opinion that many of these diseases are produced and kept up by local irritation, that in almost every instance I have witnessed, the disease has occurred either at the angle of the mouth, or the lower lip, which, from its situation and greater mobility, is much more liable to be irritated in every action in which

the mouth is concerned; it is much more readily drawn within the teeth, and when ulceration has taken place, it is exposed to the constant flow of saliva, which, particularly in cold weather, causes excoriation, and thickening in the surrounding integument.

Occasionally, cases occur in which under peculiar states of constitution, the application of stimuli, which have been previously harmless, will produce diseases of a very anomalous nature, which may be subsequently maintained by the locality of the complaint. The following case, with the particulars of which I have been favoured by Mr. Stanley, appears to have been of this description.

“A gentleman aged 19, met with a severe accident, attended with a considerable loss of blood, by which he was brought into a very weak state. Just at the period when he was beginning to recover his strength, he was induced to smoke a segar. Two days after this occurrence, an incrustation, about the size of a six-pence, formed upon each lip, exactly at the part which had been in contact with the segar. These incrustations were soon detached, and beneath them, two sores were discovered, circular and excoriated, and having matter firmly adhering to their surfaces. The sores were painful, and in a few days after their appearance, the absorbent glands under each side of the jaw, swelled, became painful, and suppuration

seemed to be about to take place in them. The general health became much disturbed. Various applications were made to the sores, but without influencing their character. About 5 weeks after their appearance, they spontaneously healed. After the healing of the sores, eruptions, having a papular character, appeared over the whole face and neck. Under the use of alterative doses of blue pill and sarsaparilla, these gradually disappeared ; but the disturbance of the health was not removed for a considerable time after the foregoing occurrences.

. “No other explanation of the sores upon the lips could be given, than by attributing them to the irritation of the segar. Perhaps, the tobacco acted as a poison to the skin, the susceptibility for this action, being derived from the debilitated state of the system. It may be observed, that he had on former occasions, smoked segars with impunity. The case seems to present an instance of a vegetable poison producing sores that would, under any other circumstances, have been regarded as syphilitic, or at least, as belonging to the pseudosyphilitic form of disease ; these sores, irritating the absorbent glands in their neighbourhood, and affecting the system ; the latter conclusion seems justified by the appearance of eruptions after the healing of the sores.”

On Diseases of the Integuments of the Nose and Face.

The alæ of the nose, and lower margin of the nostril, are occasionally liable to diseases resembling cancer, which are greatly aggravated by any catarrhal affection. I successfully removed a portion of diseased skin from the right ala of the nose, in an old lady, who is alive and well at this present time (nine years since the operation). In this case the arsenical paste had been previously employed, but had failed to remove the disease.

In some instances, the habitual use of snuff will produce a very irritable and suspicious looking disease which will extend over the upper lip. I once saw a corroding ulcer, with surrounding hardness, in this situation, in an elderly gentleman. It was considered of a cancerous nature, and had created the greatest alarm in the mind of the patient. The total abandonment of the practice of taking snuff, combined with the mildest applications, and the keeping a plug in the nostril to prevent the descent of any irritating discharge, soon altered the character of the complaint, which terminated favorably without any operation. Other portions of the integuments of the face, are frequently the seat of intractable ulcers, which may in many instances be traced to local irritation. Thus I have known diseases induced in the neighbourhood of the eye, by the continued application of a morbid secretion

from the meibomian glands, from the constant flow of tears, in obstructions of the nasal duct, and from the rheumy eyes of old people. In two instances of disease occurring at the inner canthus of the eye, I successfully dissected out the morbid portion of skin, and the patients remained permanently well. In one case, the operation was followed by a very severe attack of erysipelas, and matter formed under the occipito frontalis.

Many instances of disease of the integuments of the lower part of the face, may be traced to the irritation of shaving. It is a very common reply to inquiries into the origin of such complaints, that it commenced from a slight wound from a blunt or dirty razor. Each time the operation of shaving is repeated, the wound is aggravated, and receives fresh injury ; and, if with a view to obviate this, the beard be suffered to grow, the discharge becomes so matted together with the hair, that it is very difficult to keep the wound clean, and the elasticity of the short bristly beard will generally prevent the close application of any remedy. In such cases it will be found very useful carefully to remove the hair with a small pair of scissors, similar to those employed in the division of the cornea. This will enable us to dress the wound more closely, and will often succeed in removing the complaint. Where, however, the disease remains stationary, or inclined to spread, it will be better to remove the morbid portion, either with the scalpel, the potassa fusa, or

the arsenical paste, as may appear best adapted to the individual case. In one case of this description, the morbid disposition was kept up by the tendency which the hair had to coil up beneath the integument; several very painful pimples were thus formed, which put on a very angry ulcerated appearance. This took place after an oblique cut from a razor, which had probably divided several hairs near their roots, which continued to grow, but could find no exit, as the wound was immediately closed. By carefully extracting each hair, some of which were above half an inch in length, the irritation soon subsided.

Among the irritating causes which may dispose the integuments of the face to diseased action, the greater exposure of this part to all the vicissitudes of climate and weather deserves to be mentioned, and when any such affection has taken place, there is a much greater disposition on the part of the patient to pick and irritate these sores, than any other occurring in more concealed parts of the body. This will frequently be done without any consciousness when the mind is engaged in reading or writing. In all these diseases occurring in the integuments of the face in persons advanced in years, if the character does not improve under proper treatment, it is advisable to remove the disease, which may be done in a large majority of cases with every prospect of permanent success.

On Diseases of the Tongue.

The next part to which I shall beg to call the attention of the society, which from its situation and office is greatly under the influence of local circumstances, is the tongue. When any morbid action is set up in this part, many things contribute to maintain it. The extreme mobility of that organ, the almost continual use of it in eating, drinking, and speaking, the contact of the teeth which are often irregular and decayed, are quite sufficient to interrupt any efforts to restore a healthy action. It often happens too, that the part is so very tender, that the patient cannot bear to cleanse the mouth and teeth, which soon become incrustated, and from this source alone the complaint will be greatly aggravated, and the discharge rendered fetid and irritating. The continued operation of these causes soon induces a disease which puts on all the alarming characters of carcinoma, for the cure of which, extirpation of the diseased portion by the scalpel, ligature, or actual cautery, has been advocated by different authors; and many successful cases are recorded in which these different plans have been adopted. In looking to the history of many of these cases, considerable doubts arise of their probable nature. The period of life at which many of them occurred, and the frequent success which followed the operations, are alone sufficient to create a reasonable scepticism of their being cases of carcinoma. It is not meant here to call in ques-

tion the propriety of such operations, where the whole of the morbid part can be safely and effectually removed, although it must be acknowledged that such operations are far more formidable than when the lip is the part affected, and are productive of more suffering to the patient. Not unfrequently, however, cases occur in which the disease includes parts which are beyond the reach of any operation. Under such circumstances, it is most fortunate that many of these affections will be found to yield to a proper combination of local, with constitutional treatment; even where the characters of the disease bear a very close analogy to carcinoma. Under the head of local treatment, I would place in the first rank, the removal as much as possible, of all local stimuli, such as the taking away any decayed or projecting tooth, the shielding the tongue from pressure by covering the teeth with wax or soft lint, the *complete privation of the faculty of speech*, the frequent cleansing of the mouth with a stream of water, or any medicated liquor from an elastic gum bottle, instead of gargling or washing the mouth by any muscular effort, the employment of the most mild unirritating food, and, in bad cases, the prohibition from the use of solid food, substituting in its room, milk and strong broths, which may be thrown into the stomach through a tube passed down the œsophagus, and even in some cases, introduced through the nostril. Such a plan of treatment requires much firmness and resolution on the part of the patient: but I can

confidently state, that it will be occasionally followed with success. When there is any enlargement of the glands, it will be right to combine with this the repeated application of leeches under the chin. As local applications to the ulcerated surface, few are more efficacious than a solution of nitrate of silver, or very much diluted nitric acid, in the proportion of three or four drops to the ounce. Occasionally a solution of arsenic is very useful. Any of these may be thrown upon the ulcer with a syringe, which will be found better practice than keeping lint moistened with any lotion, constantly applied to the part*.

In two instances of apparently very malignant diseases of the tongue, I have succeeded in obtaining perfect cures by the plan laid down. A similar practice was pursued in the case of a boy at the Foundling, in whom the disease was of a very peculiar kind. Clusters of very minute semi-transpa-

* This plan of cleansing wounds with a stream of water thrown on the part from an elastic gum-syringe, I have very frequently found extremely useful, not only in ulcers of the tongue, but in any painful ulcerations about the tonsils or fauces, in which cases it frequently happens that the effort of gargling is productive of great pain, and is very insufficient to remove the sloughs, and inspissated sputum, which is often very tenacious and difficult to be got rid of. All that is required, is for the patient to hold his head over a basin, with his mouth open, and by compressing the elastic bottle, he will throw a stream with considerable force on any part of the throat to which he may wish to direct it. This may be readily done by patients in the most enfeebled state.

rent vesicles pervaded the whole thickness of the tongue, occupying nearly one half, and projected considerably, both above and below that organ. The slightest injury caused these to bleed profusely, and in some places the clusters were separated by deep clefts, which discharged a fetid irritating sanies. This disease, which had resisted various plans of treatment, both local and constitutional, gradually yielded to a strict attention to perfect quiet and cleanliness, combined with large doses of hyoscyamus, which was increased to the extent of 3i of the extract daily. I have employed the same remedy in many cases of ragged irritable ulcers in the tongue, and have been surprised at the influence which it appeared to exert over these affections. In some cases no other remedy has been employed, and its effect has been most marked and unequivocal. I have employed other medicines of the same class, but without any similarly beneficial result. Mercury, in all these cases, if administered in any quantity, seldom fails to aggravate the disease. The application of the pulp of carrots I have known of considerable service in assisting to cleanse irritable ulcers of the tongue, and induce a more healthy disposition. The patient may keep a quantity of it by his side, and frequently change it. The retaining a portion of it in his mouth, will have the further good effect of restraining him from speaking.

On Diseases of the Prepuce.

There is, perhaps, no instance, which affords a better illustration of the deleterious influence of the constant application of local stimulants, than the peculiar affection which occurs in the prepuce of old people. It generally happens that these complaints are not at first attended to by persons advanced in years, who are, from that circumstance, unsuspecting of a disease, which at an earlier period of life might have awakened their attention. When the disease is far advanced, it sometimes includes the glans penis, or becomes so connected with it round the corona glandis, as to render it necessary to remove that body, together with the diseased integument.

The following appears to be the history and progress of this affection, which has been generally considered as cancer of the penis. It invariably occurs, as far as my observation goes, in persons with elongated foreskins. A want of proper attention to cleanliness in removing the secretion from behind the corona glandis, will often lay the foundation of this complaint. The prepuce, from the confinement of this irritating matter, is excoriated, and what at an earlier period of life would be called gonorrhœa præputii is the consequence, the part becomes œdematous, the frænum thickened, and it is soon impracticable to withdraw the foreskin. Phymosis being thus established, the frequent passage of the

urine over the inflamed skin, causes it to ulcerate, and the continual application of so stimulating a fluid, produces much surrounding swelling and induration. Not unfrequently, the natural opening in the prepuce becomes nearly obliterated, and the urine dribbles away through several ulcerated apertures. An intractable disease is thus established, for which, when it has attained this height, the knife is the only remedy. In other instances the disease commences nearer to the extremity of the prepuce, which in old persons, from the diminished bulk of the body of the penis, becomes more elongated. In such cases it probably originates in their neglecting to withdraw the foreskin in making water. When we consider the greater frequency, in advanced life, with which this operation is performed, the length of time it occupies, and the incomplete manner in which it is executed, often leaving a portion in the urethra, which gradually dribbles away; we shall understand how constantly the foreskin is exposed to this irritating fluid, rendered more acrid in many cases, by long detention in the bladder, from disease in the prostate, or other causes, which so frequently obtain during the latter period of life. That such a cause is fully sufficient to produce a most serious disease, I am satisfied, from having more than once witnessed the entire subsidence of inflammation and hardness, after the removal of the irritation, by the most simple and obvious plan of treatment.

It is hardly necessary for me to state, that when any disease in the prepuce exists, whether originating in the secretion from the corona glandis, or the almost constant passage of the urine, it will be greatly aggravated by any disease in the urethra. The influence of stricture of the urethra, in producing verrucae, and many other morbid affections of the prepuce, is now so generally known and admitted, that it is unnecessary here to dwell upon it.

I have stated that when disease has far advanced, and extensive ulceration has taken place, the removal of the whole indurated mass is the only remedy, and this operation may be resorted to even when the characters of the complaint have assumed a very malignant aspect, with confident expectation of success. In three instances in persons much advanced in life, in which I had opportunities of seeing the patients for many years subsequent to the operations, the complaint never returned. Two of them died of gradual decay, being, at the time of the operation, more than eighty years of age, and one still survives.

If taken at an earlier period, the disease is perfectly remediable by removing the exciting causes. The greatest attention to cleanliness is the first requisite, and for this purpose, an elastic gum syringe, with a blunted pipe, should be frequently employed to wash away the secretion from behind the corona glandis, and to convey any medicated

lotions to correct the morbid action which has been excited. Where phymosis is quite established, and the opening is much contracted, an elastic gum catheter should be introduced, and if no disease in the urethra or prostate gland prohibit the practice, it should be retained in the bladder. The irritation from the constant flow of the urine, will be thus effectually prevented; and, generally speaking, the swelling and hardness will subside sufficiently to enable the patient to withdraw the skin to admit of the exit of the urine without passing over the prepuce. The introduction of a small portion of sponge will often assist much in dilating the contracted orifice; but where these means do not succeed, it will be right in some cases, to divide the prepuce, and expose the glans penis. I have known this operation succeed perfectly in a case which had been condemned to amputation. No operation should, however, be attempted, until the soothing plan of treatment has been tried, and the part brought into as quiet a state as possible; nor until the disease in the urethra, if any exist, be remedied as far as may be.

The removal of the whole penis is the operation which is generally resorted to in these cases, but from the examinations I have made of the parts after amputation, I much doubt whether the removal of the diseased integument would not, in the majority of cases, be equally efficacious. When we look to the period of life at which this disease usually occurs, it would be a matter of little impor-

tance whether a portion of the body of the penis were removed or not, and the quantum of pain is probably nearly the same ; but this is a circumstance of great consequence with reference to the after treatment, as great inconvenience is often experienced from the powerful contraction which takes place in the cicatrix, at the extremity of the urethra. This may be obviated, in some measure, by a free removal of integument at the operation, and the introduction of a small portion of sponge-tent at bed time, after the wound is healed : this plan must be long persevered in, as the disposition to contraction will remain for many months. It has occurred to me that possibly this tendency might be prevented by slitting open the urethra about a quarter of an inch after the circular incision had been made, and preventing the cut edges from coming in contact during the healing. Any contraction which would then take place in the cicatrix, where the integuments were united with the urethra, would rather have a tendency to evert the edges of that canal, and thus keep it constantly patent. I have never had an opportunity of submitting this plan to the test of experiment, and cannot, therefore, speak with any confidence of its success.

For the reasons, then, above stated, amputation of the body of the penis, should not, on light grounds, be undertaken ; and only in cases where the induration has extended itself to the corpora cavernosa, or glans penis, or where the

state of the patient's constitution renders it advisable. With the views I have been led to entertain of the nature and origin of these affections, I should, with great confidence, rely on the removal of the diseased integument, in those cases which did not subside under the plan of treatment already laid down. Even where the inguinal glands were enlarged, I should not be disposed to abandon the case as hopeless, as they will often subside on removing the exciting cause.

Another, and not an uncommon effect of local irritation, is the production of new growths : this most frequently occurs from the secreting surfaces in the neighbourhood of the genital organs, and anus. The enormous productions of verrucæ and condylomata which so frequently occur from neglected discharges from the vagina, may be adduced as instances. These will generally subside by great attention to cleanliness, and arresting the irritating discharge. When any diseased growth occurs in the immediate vicinity of the anus, the diurnal evacuations from that viscus, tend much to aggravate the disease. I once removed an enormous cauliflower excrescence, which was attached to the whole circumference of the anus. The tumor was divided by several deep clefts, and it was very difficult to ascertain the entrance to the gut. The disease had been considered of an incurable malignant nature, and the patient was much reduced by the profuse discharge, and the severe pain which she constantly endured. On carefully examining

it, I found that I could just reach with the finger within the verge of the anus, the surface of which felt smooth and healthy. This induced me to remove the whole tumor with the scalpel; profuse hemorrhage took place from a very large vessel which had retracted within the verge of the anus, and rapidly distended the rectum with blood, which was forcibly propelled in the form of a large coagulum. This took place twice before the vessel could be secured, in which I was greatly assisted by Assalini's double tenaculum. The case terminated favorably, but great difficulty was experienced in dilating the contraction which took place at the orifice of the anus, in consequence of the wound having included the whole circumference of that opening. Should such a case occur to me again, I should certainly only remove one part of the excrescence, to allow of the more ready evacuation of the fœces: and I should expect that the remaining portion would subside under suitable applications, and the relief which would be obtained by the removal of a part. The above-mentioned case was very instructive in showing the necessity of great caution in removing integuments at the verge of the anus. The case was complicated with stricture in the rectum, which was probably the cause of the excrescence.

Before concluding these observations, I wish most distinctly to state, that in referring the origin and continuance of disease in many of the foregoing

cases, to the action of local stimulants, I by no means wish to imply that there may not be a constitutional predisposition to disease ; nor can it be denied that truly cancerous affections will exist, independently of any local cause. My wish has been to direct the attention of practitioners to certain local circumstances, which, in many instances, may lay the foundation for disease, and the continual operation of which, if unattended to, will not fail to counteract not only the reparative efforts of nature, but all the remedial means of art. But, in directing our views to the local treatment of these cases, we ought on no account to neglect the state of the constitution, which will always participate in any considerable local malady, and when once disturbed will re-act with much deleterious influence on the original affection.

The soothing treatment which has been recommended to be adopted in these local diseases, may possibly appear very inadequate to counteract the morbid action which has been induced. In some cases, it undoubtedly will be so, yet in many others I feel convinced that it will succeed, and no possible harm can ever arise from its judicious employment ; as in cases which may subsequently require to be extirpated, it is most desirable to allay irritation by every possible means, and none is so powerful as a state approaching to uninterrupted rest. Do we not daily witness the beneficial influence of rest in the most formidable diseases of the joints

and vertebræ? and the happiest results from a total removal of the stimulus of light, in inflammatory diseases of the eye? On the other hand, what fatal terminations are the consequence of common inflammation of the mucous membrane of the trachea and lungs, from the impossibility of allowing these parts to be in a state even of temporary rest. Perhaps in no instance is the beneficial effect of repose more triumphantly evinced than after the operation of tracheotomy for the relief of acute inflammation of the larynx, where the disease has not extended itself down the trachea. With the same curative intention of obtaining a total respite from labour, and the removal of local stimulants, I would propose, in obstinate cases of disease in the urethra, in very irritable constitutions, to puncture the bladder above the pubes. A double object would be thus obtained; the urethra would be left in a state of repose, to recover from the constant irritation to which it had been subjected; and having secured a retreat for the urine, we might subsequently, with impunity, employ more active measures, in attempting the restoration of the natural passage.

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