CASE
OF
REMOVAL
OF
A PORTION OF LUNG
WHICH PROTRUDED THROUGH A WOUND;
ETC.

By W. FORDE, Esq.

COMMUNICATED BY SIR JAMES MACGRIGOR, BART.

TITLE READ JUNE 7TH, 1836.

A FINGO, of athletic make and in good health, aged about thirty-five years, in an engagement with the Caffers, at the Tabendoda mountain, on the 28th of June, was transfixcd by an azigai through the right side ; the weapon entering opposite to the eleventh rib, three inches from the spine, and the same distance from the crest of the ilium ; and making its exit in the right hypochondrium, midway between the umbilicus and the cartilage of the ninth rib, the opening being three inches distant from each ; and the whole course of the wound, supposing it to be in a direct line, six inches in length.

The man immediately withdrew the shaft of the azigai through the anterior opening, and with it

dragged forth a considerable portion of his lung. He was soon afterwards picked up by some waggons which happened to pass, and a greased rag having been applied to the part, he was conveyed to the camp early on the following day. When brought to me, his respiration was slightly oppressed and impeded, he inclined to the right side, but did not complain of pain. The piece of lung protruded was about five inches in length, and of considerable thickness, and the opening through which it had escaped, being merely an incision three fourths of an inch in length, reduction of the part was impracticable without considerable dilatation being practised, a measure which, from the situation and nature of the wound, I deemed extremely hazardous, if not impossible. But the attempt to return the lung into its natural situation was unadvisable, its texture and serous covering having been much lacerated by the man's own endeavours to tear it away; I therefore determined on its removal, for which purpose I applied a ligature tightly round it, close to the integuments, and bringing the edges of the wound together by means of a strip of adhesive plaster, left the protruded lung undivided, until the process of adhesion should take place and prevent one of two evils, which might have occurred had it been cut off immediately it was tied; namely, either that by the motions of the thorax and expansion of the lungs, the constricted part might have been drawn into the pleural cavity, conveying with it the ligature; or that the latter slipping off and the lung

receding, hæmorrhage into the sac have been the consequence.

On the third day, the desired adhesion being perfect, and the separation nearly effected by the ligature, the piece of lung was cut off with scissors, and both openings dressed with adhesive straps. From this moment there was not one untoward symptom, and the only medical treatment necessary consisted in giving one dose of Epsom salts; for a few days there was a healthy discharge from the opening in the back, which gradually ceased and the wound granulated; at the expiration of a fortnight the whole had healed, the man had quite recovered, and he can now run, throw his azigai, and perform any other active feat as well as any of his most agile companions.

Reflecting on the situation of the openings caused by the entrance and exit of the weapon, and the apparently direct course in which it had passed, it might appear impossible that protrusion of a portion of lung, or a wound in any part of the thoracic parietes could have occurred; and one would reasonably suppose a wound of the liver, ascending colon, or omentum, as more likely to be the consequence. I confess I am at a loss to account for the protrusion of a piece of lung (and lung it most decidedly was, having been carefully examined by assistant surgeon Bickersteth and myself, and its texture and appearance could not easily be mistaken) in the centre of the right hypochondriac region, as connected with the apparent course of the wound, unless it be assumed

that at the moment it was inflicted, the man had been in some extraordinarily crouching position.

Of necessity the diaphragm, with its pleural and peritoneal coverings, must have been perforated, and yet the man recovered without a single symptom of pleuritic, peritoneal, or pulmonic inflammation.

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August 10th, 1835.