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Hospital Reports.

ST. GEORGE'S HOSPITAL.

ANEURISM TREATED BY PRESSURE, ILLUSTRATED BY A SERIES OF CASES.

By T. HOLMES, Esq., Surgical Registrar to the Hospital.

I beg to forward the first of a short series of cases of aneurism treated by pressure, which have fallen under my notice at St. George's Hospital during the last few years. I shall take the opportunity of making a few remarks on those cases, and on the subject generally, when I have finished the details of the cases. I will only observe, with reference to the one which I now send, that the case was from the outset an unfavourable one for the employment of pressure, on account of the large size of the aneurism, and the dissipated habits of the patient; still it can hardly be quoted as an instance of the failure of that mode of treatment, as it might be urged that it would very probably have succeeded if persisted in for a few days, though at the expense of some suffering to the patient; and further, that the enlargement of the collateral vessels which must have followed the employment of pressure for so long a time (although none of the superficial arteries were felt enlarged), and the great extent to which it had induced coagulation in the sac, must have had a most beneficial influence on the result of the operation which was afterwards performed.

CASE I. Popliteal Aneurism of Large Size in a Young Man of dissipated Habits: Compression for about Four Weeks: Imperfect Cure: Ligature of the Femoral Artery: Recovery. A groom, aged 24 years, of dissipated habits, but good general health, was admitted on May 1st, 1855, under the care of Mr. Pollock, on account of popliteal aneurism. It appeared that he had not been in the habit of riding so much as usual for about a year before his admission. Five months previous to the latter date, he noticed a small lump in the right ham, which gave him some pain; but, as this did not last long, he paid little attention to the lump, but observed pulsation in it about a month after its first appearance. He had been going about his usual employments up to a week before admission, when the pain in the part compelled him to lay up.

On examination, the aneurismal tumour was found to be very large, filling up the ham, and extending for a considerable distance on either side. The pulsation was regular, heaving, but perhaps a little sharper than usual, accompanied with a loud rasping sound. The size of the tumour did not seem very much influenced by closing the artery in the groin, and it recovered its former size immediately on the removal of pressure. There was a good deal of general enlargement in the neighbourhood of the aneurism, and some effusion into the synovial membrane of the knee-joint.

Compression was applied to the artery by means alternately of a *presse-artère* in Scarpa's triangle, and a weight of about seven pounds in the groin. He bore this extremely well at first, saying that the pressure relieved the pain of the aneurism. The compression was only of sufficient strength to check, but not stop the circulation through the aneurism, so that a sound could still be heard in it

when the pressure was applied. For the first three days he managed the instrument himself, and thus the compression was not very steadily exercised. Little or no progress was made, the pulsation being more distinct on the fourth day than on the first. The house-surgeon then undertook the management of the case, and from the fifth to the seventh day (a period of about thirty-six hours) the pressure was vigilantly watched. He bore it well, but it did not make any very distinct impression on the swelling. From the eighth to the tenth day the pressure was applied, but not quite so continuously as before, on account of the distress which he now began to experience. On the tenth day it is noted, for the first time, that the pulsation was beginning to diminish, and from this time coagulation advanced rapidly in the sac, so that on the fifteenth day the sac was almost full of solid, and only a very slight pulsation could be felt. In the meanwhile, however, the patient was beginning to suffer extremely from the severity of the treatment; his pulse became very frequent and weak; tongue dry and irritable; and he complained greatly of pain in the head, and in the ankle and knee of the affected leg. The pressure was continued, however, for another week. On the twenty-fourth day it is noted that he had been complaining of extreme pain in the part for the last two days. The aneurism, however, appeared cured; no sound or pulsation was perceptible, and the tumour seemed perfectly solid. The pressure was, therefore, omitted. It should be observed, however, that no enlarged vessel could be felt in the neighbourhood of the sac.

Four days after this note (twenty-eighth day from the commencement of the treatment), the swelling was softer and somewhat larger, and a little pulsation could be felt in it, but no sound heard. He was so much reduced in flesh and strength that it was not thought judicious to recommence the pressure; and next day, as the pulsation was more obvious, a bruit could be plainly heard, and the swelling had increased an inch and a-half in circumference, it was decided to tie the artery. This was accordingly done on the thirtieth day, in the usual place. The vessel, when tied, appeared quite natural. No untoward symptoms followed the operation. He had lost sensation in the toes a few days before the operation, and this did not return for a long while; but there was no disposition to gangrene. The ligature came away on the thirteenth day. The articular vessels could be felt enlarged, and the pulsation in the tumour was permanently stopped. The knee, however, remained contracted for many months, and sensation in the toes had not returned when he left the hospital in August.

This patient was seen a few days ago; the sensation had been perfectly restored, and the tumour was much shrunken; the knee had quite regained its power of motion. It may be mentioned, however, that he had been in a country hospital for two months in the winter on account of frost bite on the great toe of the affected limb.

[To be continued.]

LIVERPOOL NORTHERN HOSPITAL.

CASE OF NECROSIS OF THE LOWER PART OF THE FEMUR.

By ELLIS JONES, Esq., Senior Surgeon to the Hospital.

JOHN WHITE, aged 23 years, a native of the county of Chester, an agricultural labourer, was admitted into the Northern Hospital, in November 1855, with disease of the lower part of the left femur. He stated that he had been