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CASE OF INTERNAL AND EXTERNAL HÆMORRHOIDAL
TUMOURS: NITRIC ACID: LIGATURE: ÉCRASEUR.

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JOHN SALISBURY, aged 46, was admitted under my care, on September 25th, 1856. The patient, a sallow unhealthy looking man, somewhat imbecile in mind, had been suffering from piles for several years, which had lately bled at intervals to a considerable amount, so as to produce considerable general debility, as evidenced by his anæmic aspect. He had been subjected for some months to general and local treatment, but no improvement had been obtained, and, on the contrary, the tumours had increased in size, had been returned with more difficulty, and had bled more frequently, and to a larger amount. His health had also lately been rapidly declining.

On examination, the margin of the anus was found to be surrounded by hæmorrhoidal tumours of large size; and, on the effort of straining being made, large masses of dark coloured congested internal piles were forced down, in some of which ulceration had evidently commenced, and the exposed surface bled on the slightest touch. The surrounding healthy bowel having been well protected by oil, the internal tumours were freely touched with strong nitric acid, by means of a glass brush; the whole mass was then coated with oil, and returned beyond the sphincter. An opiate was given, and the patient sent to bed.

Sept. 30th. The part to which the acid was applied had sloughed away, leaving a much reduced growth, with a healthy healing surface; and the patient stated that he suffered very little pain from the application of the acid.

Oct. 8th. The acid was again applied, as the internal tumours have not entirely disappeared.

Oct. 16th. No trace of the internal hæmorrhoids could be detected; but, as the external tumours remained undiminished, ligatures were applied to the two largest. A double ligature was passed through each tumour; the skin was divided in the line of ligature; and then both were drawn very tightly, and tied.

Oct. 19th. The ligatures had come away, leaving a healthy suppurating surface.

Oct. 25th. An *écraseur*, obtained after much delay from Paris, was used to remove the two remaining external piles. The tumours were drawn out as far as possible with dressing forceps, and the *écraseur* applied successively to the neck of each. The first was removed rather too rapidly, and some little bleeding occurred; but, in removing the next, the screw was turned very slowly, and no bleeding at all resulted. The patient was placed under the influence of chloroform; hence no information could be obtained as to the amount of pain produced by the crushing operation of the instrument.

Oct. 26th. On my inquiring for the patient this morning, I found that he had suffered no pain since the operation, and was then walking in the garden of the hospital.

REMARKS. Since the candid confessions of Dupuytren and Sir A. Cooper, supported by the recent experience of Quain and other writers, as to the danger of removing internal piles by the knife, surgeons have very properly abandoned an operation fraught with such terrible risk to the life of the patient and reputation of the operator. The ligature has hence become generally adopted for the removal of internal piles. Mr. Quain strongly advocates its use, and says, "I have no fear of any unfavourable result, provided the precautions to be hereafter mentioned are observed." I agree with Mr. Quain in believing the ligature to be generally, when properly used, a safe and efficient remedy; but, at the same time, fatal results do occur, from pyæmia, etc., as the medical journals testify; and I have found the nitric acid less painful, free from all the dangers of the ligature, and quite as efficient; while in the timid patient, male or female, it excites no apprehension, and is never objected to, should a second application be required.

Mr. Quain, to whom we are much indebted for his valuable contribution to rectal surgery, speaks somewhat slightly of the use of nitric acid. "Other means," says he, "have been used for the removal of hæmorrhoids: for instance, nitric acid and the actual cautery. The acid is an uncertain application." I have used the acid in many cases, both in private and hospital practice, and have found it anything but uncertain in its effects. When applied effectually, as recommended by Dr. Houston, the tumid and bleeding surface of the congested mucous membrane which covers the piles is destroyed; the slough caused by the acid soon comes away; a healthy granulating surface is produced, which heals rapidly, and by its contraction produces a beneficial and curative pressure on the subjacent distended hæmorrhoidal vessels. When applied too timidly, the acid is indeed an uncertain application; but the same may be said of every remedial agent when not used so as to produce the required effect. I can from repeated use fully subscribe to the words of Dr. Druitt in the last edition of his useful manual, when he says, "It is difficult to exaggerate the benefits of this plan of treatment. It seldom causes pain or any ill consequences."

With regard to the external piles, I was induced to adopt the ligature to avoid all chance of hæmorrhage in a patient who presented the anæmic condition so fully. The ligature to external piles, when applied without division of the skin by the knife, is a painful and unjustifiable proceeding, and is very properly denounced as such by Mr. Quain and other writers; but the former allows that "the external hæmorrhoid may be tied without ill consequence, provided the skin be completely divided in the track of the ligature before it is drawn tight," or "if the skin be turned back before the ligature is applied". This plan I have always adopted; but in future I imagine that the *écraseur* will supersede the use of all other agents for the removal of external piles. In this case, especially when applied more slowly to the growth last removed, it effected a bloodless and entire removal of the hæmorrhoid, with no after inconvenience to the patient; and chloroform enabled us to render the immediate effect a painless proceeding. I believe that in this instrument we possess a useful agent for the removal of pendulous growths, and even deep seated morbid growths after the integument is reflected from them; but I can scarcely hope to see it realise some of those somewhat romantic anticipations in which our sanguine Gallic brethren have lately indulged.