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Illustrations

HOSPITAL PRACTICE:

METROPOLITAN AND PROVINCIAL.

ST. GEORGE'S HOSPITAL.

FIBROUS TUMOUR OF THE THIGH.

Under the care of T. TATUM, Esq.

WE had an opportunity, a few days ago, of seeing a very interesting operation for the removal of a large tumour situated at the back of the thigh, which was of such great interest, both pathologically and surgically, that it deserves insertion, although the unfortunate event of the case rendered it less instructive than it would have been had the patient survived. The patient was a boy, 14 years of age, William C., an agricultural labourer, of very healthy appearance, and who had always enjoyed sound health. The tumour had been noticed about three years, and was slowly growing. It had attained an enormous size on admission, reaching from a short distance below the trochanter down to within about three inches of the popliteal space, and measuring more than six inches in length. It was also of considerable thickness, and had made the parts so tense that it was difficult to judge of its connexions. On relaxing the muscles, which were prominent and tense below, it became much more moveable, and appeared as if unconnected with the bone. Its structure was hard, and the surface smooth. There was no interference with the functions of the limb. Various opinions were entertained, both as to the nature of the tumour, and the proper course to be adopted in its treatment. On the former head, the comparatively slow growth of the tumour, and the perfect health of the patient, appeared to negative the supposition of malignant disease. The tumour seemed too moveable to be growing from the bone; its large size, and the want of any symptoms of paralysis or disordered innervation, were against the idea of its being a neuroma of the sciatic nerve; its smooth surface was not very like the lobulated outline of an enchondroma. On the whole, it was taken to be an innocent tumour, probably of the fibrous or fibroplastic nature, and not growing from the femur.

As to the treatment, it appeared evidently necessary to remove it, since its size already prevented the free use of the limb; the veins over it were beginning to enlarge; and it seemed clear that, in a short time, it must ulcerate, and thus cause the patient's death. Whether, however, it would be possible to dissect it out, or whether is would be necessary to resort to amputation, was a difficult problem to solve. The great size of the tumour, and its situation close upon, if not surrounding, the great sciatic nerve, rendered it doubtless very hazardous to attempt to dissect it out; still the cruelty of sacrificing the whole limb in so young a subject (for the close approximation of the tumour to the top of the thigh would have rendered it necessary to amputate at or just below the hip-joint) determined Mr. Tatum to cut down on the tumour, and, if it were found innocent, to do his best to remove it. This was accordingly done. The posterior surface of the tu-mour having been exposed, the sciatic nerve was found imbedded in it, and the muscles stretched over it. A small piece of the morbid growth was cut out, and found to be of the ordiresolved on. The first thing was to secure the integrity of the sciatic nerve. Six inches in length of this large nerve was deeply inclosed in a wide groove on the back of the tumour. It was dissected out with care, and apparently without any injury to its sheath. The muscles were then dissected off the

tumour, and the soft parts separated from it down to the femur. The tumour dipped down to the periosteum, but seemed to have no organic connexion with it. The size of the growth was so great that it was impossible to get it out entire without injuring the nerve; so that Mr. Tatum was obliged to slice it up, and remove it in pieces. It hardly yielded a drop of blood when divided. Five successive portions were removed, and thus the whole growth seemed to be taken away. The operation was necessarily protracted, and a good deal of blood was lost, but not a very large quantity. The boy was kept under the influence of chloroform during the whole period. He never fairly recovered, and died on the fourth day after the operation; gangrene having made its appearance in the edges of the wound, and in the skin of the upper part of the calf of the leg.

The post mortem examination revealed nothing remarkable, except that the firm contraction of the heart, and the fact of all its cavities being filled with firm clot, appeared inconsistent with death from hæmorrhage. Numerous portions of the tumour were examined, and found to consist of fibrous tissue

The exhaustion of so protracted an operation, the great loss of blood necessarily occasioned in exposing such a vast surface, the isolation of so large a portion of the principal nerve, and perhaps the depressing effect of the prolonged exhibition of chloroform, were probably the causes of the gangrene. It is to be regretted that the case turned out so badly; still there can be little doubt that the course adopted was perfectly justifiable; and the bold and dexterous attempt which was made to preserve the limb deserved, and would probably on another occasion have met with, better success.

ROYAL FREE HOSPITAL.

HYPERTROPHY OF THE CLITORIS, WITH CONDYLOMATA.

Under the care of V. DE MERIC, Esq.

[From Notes by N. HALL, Esq., House-Surgeon.]

WE subjoin notes of one of the most extensive cases of this disgusting ailment which we have seen lately; one in which the new growths were so extensive as to constitute a really formidable malady, and which it would have been difficult to attack by any less severe measure than the one adopted by Mr. De Méric. In fact, the inefficiency of the methods usually adopted (by saturnine applications, caustics, etc.), in many cases, is well known; and now that the universal use of chloroform has diminished the unwillingness of surgeons to resort to such painful methods of cure, it has caused a much more free recourse to the knife than used to be the practice some years ago. It has seemed to us, however, to be of little use to remove the vegetations, unless that be done entirely, and the tissue from which they are growing be freely destroyed. The hæmorrhage is generally copious, although not alarming. In France it has, we believe, become very usual to make use of the écraseur for the performance of these operations on the clitoris and labia; and they are of the class of cases where this instrument may be used safely, and with tolerable certainty of avoiding hæmorrhage; but, as some caustic must afterwards be used to avoid the reproduction of the morbid growth, and this process is certain to easily check the hemorrhage, there is no particular motive for avoiding the use of the knife. As to the precise caustic to be used, it is probably a matter of no great moment. In two cases recently under Mr. Cutler's care at St. George's Hospital, we have seen the actual cautery used, and with very good effect; and perhaps this agent is the most rapid and powerful; and it has, besides, the additional advantage, that its action is at once limited to the parts touched—an object which is more difficult to effect with deli-quescent caustics. There are few cases in which the great advantage of chloroform is more strikingly shown than in the treatment of this troublesome and obstinate disease. Elizabeth G., aged 22, was admitted on February 28th, 1859.