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Original Communications.

CASES OF TRANSPLANTATION OF SKIN AT THE BOSTON CITY HOSPITAL.

Reported by MESSRS. BRET, HANDY and BOLLES,
House Surgeons.

CASE I.—(Service of Dr. INGALLS.)—B. K., æt. 36, domestic, entered the hospital Aug. 5th, 1870, for an old recurring ulcer of the leg, measuring two by three inches. In part of its surface deep, offensive and irregular. She was ordered a wash of soda chlorinata (ʒij. ad. Oi.), under which she steadily improved.

Aug. 14th.—A portion of healthy epidermis was removed from the inner aspect of thigh and placed within the ulcer at three different places, each piece as large as a millet seed, "with the idea of giving the ulcer several points to heal from and thereby hasten its closure."

On the 17th, after the removal of the plaster for the first time, no islets were seen, after which no mention was made of the transplantation, but the leg took on a healthy action, and healed very rapidly, growing from several centres, and, on the 26th, patient was discharged, well.

CASE II.—(Service of Dr. FIFIELD.)—A. C., female, æt. 20, entered June 3d, 1870, with a large, foul and deep syphilitic ulcer of left leg, five by six inches; in the middle, the tibia was exposed for nearly two inches. From time of entrance until the middle of October, almost every kind of local and constitutional treatment had been tried, and the ulcer had become stationary at about one half its first size. Several large and very many small pieces of bone had exfoliated.

At this time the tibia was cut down upon, and dead bone removed; the ulcer was treated still further for a week, and again remained stationary.

Oct. 25th.—Several pieces of skin, each as large as a rice grain, were transplanted to the surface of the ulcer and covered with plaster.

Nov. 15th.—Nothing could be seen of

the pieces, but the ulcer had contracted considerably. Six new pieces of skin were then inserted in little cuts made in the granulations. Three days after, nothing seen of these.

20th.—Ten more transplantations.

23d.—Six more, two of which were taken from nurse.

25th.—Several bits of reproduced skin are seen in place of earlier transplantations (those of Nov. 15th). Those of the 20th are all adherent, but the epidermis is peeling off from the true skin and falling away. The remaining portion of the transplanted skin is whitish or bluish, and firmly adherent.

26th.—All the last pieces are also adherent. Five more put on.

Dec. 1st.—A bridge, three quarters of an inch long, has formed across the lower corner of ulcer by three pieces of skin which have extended and met, and another, one and a half inch in length, across another angle, is almost completed by three more. Nineteen pieces can now be counted, all growing, and a portion of which have also retained their epidermis. The larger islands now are circular, more than one fourth inch in diameter, consisting of the original skin and a broad, white border of new growth. They amount in all to one third of the area of the ulcer, which is triangular, and two and a quarter inches from corner to corner.

CASE III.—(Service of Dr. INGALLS.)—M. C., æt. 28, domestic, entered hospital Oct. 28th, 1870, with an old recurring ulcer on the inner aspect of the right leg and one inch above the malleolus. It was three inches by two inches in diameter, deep, and with an inflamed base, sharp edges, and surrounded by a halo of bluish tissue. The veins of the leg were varicose. Water dressing was applied.

Nov. 3d.—The ulcer has lost its inflamed base and sharp edges. Three pieces of skin, the size of canary seeds, were taken from the inner aspect of arm and placed upon the surface of the ulcer, and the water dressing re-applied.

Nov. 14th.—The ulcer is contracting.

[WHOLE No. 2236]

Two of the pieces of skin planted have taken root and are spreading over surface of the ulcer, one being the size of a pea.

18th.—One of the pieces planted has extended across the ulcer and united with both edges, and laterally for two thirds of an inch. The other has united with the edge of the ulcer, and is about the size of a buck-shot. The growth of the bits of skin and the contraction of the edges have nearly healed the ulcer.

26th.—Ulcer well. The largest piece of skin grew to the size of a five-cent nickel coin; the smaller, to that of a three-cent silver piece.

CASE IV.—(Service of Dr. FIFIELD.)—I. V., æt. 12, male, entered Oct. 21st, 1870. Suffered great loss of skin of right arm by sloughing after an injury, leaving an ulcer extending around the limb and nearly six inches vertically.

Nov. 16th.—Two small pieces of skin were removed from the leg and put into cuts in the granulations.

20th.—No adhesion. Nine pieces laid on to-day and covered with isinglass plaster.

24th.—Six more pieces, each divided into two. Those of the 20th appear to have come away.

Dec. 1st.—No success thus far. The granulations in this case have been rather flabby from the first.

CASE V.—(Service of Dr. FIFIELD.)—D. F., æt. 31, male, entered Oct. 24th, 1870, for a recurring, deep, varicose ulcer one and a half inch in diameter. Dressed at first with wet strapping, according to the "Chapman method."

Nov. 22d.—Ulcer now three fourths of an inch by one inch. Four bits of skin laid in a square, half an inch apart, on its surface.

30th.—All the pieces adhered and have met each other. The edges of the ulcer have also reached the skin transplanted. There only remains to heal a minute spot in the centre of the "square." The epidermis in this case did not come off.

Dec. 4th.—Entirely well.

THE AGUE THEORY.

By JOHN W. WEIR, M.D., Edwardsville, Ill.

I READ with much interest, in the JOURNAL of January 14th, 1869, a review, or criticism, by Dr. H. W. Harkness, of Sacramento, Cal., on Dr. Salisbury's theory of the cause of fever and ague. Dr. H. says: "A small vegetable spore of Palmella, one five-thousandth of an inch in diameter, was

dragged to the light of day, and the culprit put upon his trial. A few suspicious circumstances connected with the development and growth of the criminal were brought forward as proofs, and cleverly analyzed, and the little atom was declared guilty of having been the cause of half the ills of human life."

Dr. H. very "cleverly" criticizes the theory of Dr. S., but in the sequel leaves the subject still further in the dark, by suggesting that the "culprit" may be a subtle ether in the atmosphere. He tacitly falls into the miasma theory. The truth is, I believe, that all members of the profession, who have written on the subject, have either advocated or adopted the miasma theory, or failed to say anything respecting it; and it has thus become the settled theory for the past fifty years.

I think it is well for the human, and animal creation, that, although this little spore was "dragged to the light of day, and condemned," it has thus far escaped execution. For I think that which has been thought to produce "half the ills of human life," is a vital ingredient of our atmosphere, and as essential therein as oxygen, hydrogen, carbon, or nitrogen.

When I was reading medicine with Dr. Kendall Davis, of Reading, Mass., in 1834, I observed the mercury, in the thermometer in my room, rose and fell only 5° from the warmest part of the day to the coolest part of the night. This surprised me, for I was aware that in Kentucky, where I had formerly lived, the rise and fall was from 20° to 30°. My attention was particularly called to the fact on a hot day in August, when I found the thermometer to register 80°; having occasion to be in the open air during the night, I found many of the large stones still retaining the heat which had been given them by the sun during the day, and in turn they gave it off to the surrounding air, and thus maintained it at a temperature only 5° less than it had during the day. I believe I learned from this circumstance the cause of chills and fever. The North-eastern States are so studded with stones that, during the warm season, they become heated during the day, and keep the air comparatively warm and dry during the night, and, in the cold season, become as icebergs at night, and keep the days cold. They act as equalizers, summer and winter, and hence there is but little difference in the temperature of day and night.

During a constant practice in this malarious region, I have seen no reason to change the opinion I formed in Reading,