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ST. MARY'S CHILDREN'S HOSPITAL, PLAISTOW, E.

A CASE OF STRANGULATED INGUINAL HERNIA, OF CECUM AND VERMIFORM APPENDIX, IN A CHILD SIX WEEKS OLD SUCCESSFULLY TREATED BY OPERATION.

(Under the care of Mr. E. A. T. Steele.)

It is very unusual to find the cecum and vermiform appendix forming the only contents of the sac of an inguinal hernia; such an occurrence is more likely to take place in a child than in an adult on account of the smaller degree of fixation of the cecum which is found at an early age. The edges of the inguinal rings are so soft in a young child that strangulation of the bowel is always very slow in occurring. The persistence of the congenital processus vaginalis in this case doubtless made the protrusion much more easy. For the notes of the case we are indebted to Mr. J. C. S. Pearson.

A child, aged six weeks, was on June 6th taken to the St. Mary's Children's Hospital, Plaistow, by the mother who gave a history of three days' vomiting which had gradually increased in severity. There had been no action of the bowels during that time. When the patient was examined by Mr. Steele a tense irreducible tumour of about the size of a Tangerine orange was found in the right inguinal region. He diagnosed it as a strangulated inguinal hernia and decided to operate at once. Chloroform followed by the A.C.E. mixture was administered. An incision two and a half inches in length was made over the tumour, the tissues being divided down to the sac. This was then incised and the hernia was found to consist of the cecum and vermiform appendix. It was very congested but otherwise healthy, the peritoneal surface being smooth and glistening. The inguinal ring band at the internal ring was then divided, but it was impossible to perform reduction as the meso-cecum was firmly adherent to the structures external to the ring. The original incision was then extended upwards and outwards for about two inches, everything being divided down to the peritoneum. After the adhesions had been freed the gut could be replaced. The peritoneal edges having been united by interrupted silk sutures, the pillars of the ring and the incised muscles were brought together by sutures, thus converting the operation into one of radical cure. The skin was united by a continuous suture, a slight opening only being left at the inferior part of the wound to allow of the exit of any serous discharge, and the whole was dressed with cotton gauze and pad. On June 8th an enema was successfully administered; on the 10th the wound was dressed and found to have healed by primary union; and on the 13th the sutures were removed, a pad and gauze only being applied. The child was discharged on the 22nd and on being seen from time to time since has been found to be in good health.

Remarks by Mr. Steele.—This case was one of congenital hernia of the cecum and vermiform appendix which had become strangulated. The peritoneal cavity through which the bowel had been drawn was very small, and young as the infant was it was surprising that strangulation had not taken place earlier. From the history of the case I think it probable that while the peritoneal cavity was formed the infant underwent a somewhat severe and prolonged operation, the child's condition on leaving the table being excellent.