Case of the Perforation of a Constricted Urethra by a Cutting Instrument, with Remarks on the fatal Consequences of such an Operation.

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IN the Repository, vol. i. p. 458, is inserted a case of Stricture, the treatment of which is recommended as original and beneficial; but which, in the instance I have to relate, proves decidedly destructive. Mr. Bythell says, he succeeded in removing a stricture of some extent, by means of forcing a pointed metallic instrument through the obstruction, until the resistance was subdued; and that the patient recovered. The success of this case encouraged him to describe the operation, and to recommend its adoption in similar instances. I am well aware how impracticable it is to generalize from individual cases; yet the recital of particular practical results cannot but meet with commendation, as it conduces to further experiments, by which they may be better illustrated, and the propriety of their adoption or rejection estimated.

Success in a solitary case is scarcely sufficient to justify the adoption of the successful practice. However, I do not intend to draw from my objection an universal rule; on the contrary, the case I offer, as it is a fatal case, will surely, I trust, depress the importance of the practice recommended by Mr. Bythell, as much as his single record of benefit could exalt it.

It is not my wish to depreciate success; events must ever be the standard of practice; and I consider that it would be unfair to the gentleman whose success has been made public, to withhold from that public a parallel case, the issue of which was diametrically opposite to his own. For although I admit with Celsus, that a doubtful remedy has a claim to our attention in desperate cases; yet I must have extraordinary prospects of relief, indeed, to influence me to the use of any measure, in which there exists a possibility of its being the cause of the death of a

patient, who without its application would have suffered an inconvenience only without direct danger.*

Theory is certainly the true foundation of practice ; and experimental inquiry is of the utmost importance, when it is formed upon the legitimate basis of analogy. Every one knows that the incision of a part excites inflammation, and a deposition of coagulable lymph, which in a short space of time becomes organized matter. It therefore appears from theory alone, that the puncture of a diseased part would in general remain pervious but for a short time. By the exudation of lymphatic matter, its sides would very soon become consolidated ; and, if in the urethra, would soon obliterate the canal. I must, therefore, agree with the Editors of the Repository, who remark on Mr. Bythell's case, that they consider it more as a lucky hit, than as a precedent for practice. Besides a fatal termination, as will appear in the recital of the following case, may render those who follow such precedents obnoxious to a verdict of " mala praxis."

CASE.

Quarter Master Franklin, of the Limerick Militia, was in possession of tolerably good health, with the exception of having a stricture in the urethra, which incapacitated him from making water, otherwise than in a very slender stream ; when he placed himself under the care of a soi disant Dr. W——, an illiterate and unauthorized practitioner of Surgery. This charlatan, for a considerable premium, engaged to remove the obstruction. There was a small discharge of mucus, not an unusual symptom of stricture, from the urinary canal. From the information I procured, he had also, some years ago, been the subject of repeated gonorrhæas ; from which source he justly inferred the formation of his stricture. He had not, by his own account, had any recent sexual communication, which might have rendered the nature of the discharge equivocal. He had been I believe some weeks under this person's management, when the operation I am about to describe was determined upon as a dernier resort.

The patient was placed on a bed, with his knees elevated towards the belly, holding a candle for the convenience of the

* I advert only to the case I have undertaken to relate ; for I cannot but admit, that strictures of the urethra sometimes occasion immediate apprehension, although they are, I believe, more frequently unaccompanied with danger.

operator. A tube formed from a catheter was then passed down the urethra until its progress was resisted. A metallic bougie with a sharp point was now thrust through the canula down to the obstruction; and then by repeated efforts pushed apparently through it.*

Some hours after this operation the patient was seized with symptoms indicative of inflammation of the bladder and peritoneum. These increased in such a rapid manner, that the assistance of the medical gentlemen of the regiment, Surgeon Furlong and Assistant Surgeon Gason, was requested by the patient. Staff Surgeon Irwin and myself also visited him. I attempted to pass a catheter and bougie into the bladder, but could not move them beyond the stricture, although I believe a catheter was passed immediately after the operation. After the means likely to remove the inflammation, such as venesection, purgatives, and other antiphlogistic remedies were used, without the least benefit, the patient died on the seventh day from the performance of the operation.

APPEARANCES ON DISSECTION.

An examination of the body took place the day after the patient's death, at which the army medical practitioners before mentioned, and myself, were present. The urethra being slit open through its whole length, a stricture was observed, nearly three quarters of an inch in length, situated about three inches and a half from the exterior orifice of the canal. No perforation could be discovered in it, but at its anterior part we plainly perceived an angular puncture, which exactly corresponded with the point of a small trochar, such as is used in tapping the scrotum in hydrocele. A probe was introduced at this part, which by following the course taken by the sharp instrument, passed into an adjoining sinous cavity; and did not enter into the substance of the

* A flexible metallic bougie, armed with the cutting extremity of a trochar; and a catheter, with the perforated end cut off, were the instruments employed. These the operator displayed to us, and described the mode in which they were applied, by way of illustrating the simplicity of his practice, and exonerating himself from the imputation of producing the symptoms of disease under which the patient now laboured. This explanation was made before the patient's death, to Messrs. Furlong, Gason, and myself, the patient himself bearing testimony of its truth.

stricture, but glanced sideways into this sinus, which originated from that part of the urethra posterior to the obstruction.* On opening this cavity, its parietes were perceptibly lacerated and incised by the progress of the trochar. We could now comprehend how this instrument had passed through the sinus, until it came to its source at the hinder part of the stricture, when another thrust drove it into the membranous and cellular substance near the neck of the bladder. The opening into the bladder was likewise triangular; but much larger than that anterior to the stricture. The bladder was much thickened and collapsed. Its fundus displayed livid discolorations, the effect of gangrene; and in and over the surface of the internal coat were observed, lengthened flakes of pus, discoloured by blood. The prostate gland did not exhibit peculiar marks of disease. The omentum and the peritoneum were beautifully and minutely injected with red blood, the undoubted consequence of sympathetic inflammation. The parts (consisting of the bladder and penis) were dissected off from the body, and given to me, with the wish from the gentlemen present that I would lay these facts before the public.

The preparation has been examined by most of the medical gentlemen in this neighbourhood, and will always be at hand for the inspection of others who may desire to examine it. It will remain as a monument of the impolicy of the toleration of empiricism, and as a record of the dangerous consequence of misplaced confidence.

"Fide sed cui vide."

A coroner's inquest was subsequently instituted to inquire into the cause of Mr. Franklin's death, when, from the depositions of the medical gentlemen of the army, and my own, the jury found the following verdict:—

"Died in consequence of an unskilful operation."

* This was an effort of nature to form a new passage where the urine was obstructed; and it was curious to observe the form of this sinus, its breadth in the middle, and its converging to a point at the outer end of the stricture. From these circumstances it appears possible, that the urine might have burst through the thin membrane, which separated this sinus from the urethra; and thus have wrought a cure. I think a small opening must have already existed, although it was not discriminated from the incision made at the beginning of the stricture by the trochar.