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CASE OF INFLAMMATION OF THE APPENDIX CÆCI.

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X. P., an unmarried girl, 18 years old, was brought to my office by her mother, on the 31st day of October, 1862. She was evidently suffering and feeble, was somewhat bent forward in standing, walked with difficulty, and complained of pain in the bowels, which she ascribed to her not having been unwell for five weeks.

Examining her externally, I found in the region of the ilco-cæcal valve a circumscribed tumor, hard, deeply placed, rather larger than a hen's egg. She rode home and was put on her back; and at my subsequent visits, I obtained the following history:—

At about the middle of the month of August preceding, while staying at her sister's house in a neighboring seaside town, she ate very largely of wild cherries, swallowing the stones, and soon after, whortleberries and milk. There followed that night a severe attack, in regard to which no very accurate information can be obtained. She vomited repeatedly, had excruciating pain in the bowels and was not able to obtain any evacuation. Three or four injections had at length the desired effect, and gave her much relief; as to the character of the discharges, nothing can now be learned. The next day she had sufficiently recovered to be able to walk two miles, though against the earnest remonstrances of her friends, and with great difficulty. From this time, for many weeks, she had recurring attacks of abdominal pain. She returned to Boston in the latter part of September. The night before her return she had several severe chills; the following morning she was free from pain, while in the horizontal position, but on attempting to rise, she fainted and vomited. During the few weeks following her return, she went to her place of work as usual. She often made complaint; but as when previously in perfect health, she had been the victim of many imaginary ailments, and as it was noticed that she ate with excellent appetite, no great attention was paid to her symptoms till the time of her visit to me.

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She was of small size, still appearing a mere child; feebly built, with brown hair tinged with red, and long, soft eyelashes. Her father lived and died an intemperate man. A sister, next older than she, is in one of the State lunatic asylums, in a state of hopeless dementia.

She first menstruated before she was 12 years old, and from that time the function was performed with entire regularity. She had never any pain during the period. She was commonly unwell for a week. After the illness in August, she menstruated once at the proper period, but imperfectly, and only for two or three days. In the next month the function was in all respects well performed. When she came to see me first, she had passed five weeks without menstruating, and without any menstrual nixus. To complete this portion of the history, I will here add, that one week later, after six weeks, without special treatment, she was regularly unwell, and that after that time, for a period of seven months, there was no return.

She had been habitually a somewhat costive person. For a week before her first visit to me, there had been daily from one to three loose discharges; slight remedies soon corrected this symptom, and afterwards, either by the efforts of nature, or with the aid at times of the mildest laxatives, there were regular and entirely healthy dejections. There was never any important pain during micturition or defæcation.

The tumor, which has been heretofore described as it appeared on the last day of October, continued, without any noticeable incident, to increase, during the next six weeks, in extent and prominence, till on the 11th day of December last, it occupied the whole lower abdomen, and extended about once inch above the umbilicus. It was exceedingly tense; to use the patient's expression during the last few days of this period, she "felt all the time as if she should burst." Seen in the horizontal position, the part of the abdomen occupied by the tumor appeared to be everywhere raised from one and a half to two inches above the ordinary level. The enlarged abdomen bore no resemblance to that of pregnancy, being much flatter and also more uniformly resisting and dense than that of a woman pregnant at six months, the period most nearly approaching it in appearance. During the greater part of the six weeks now under consideration, there was no great disturbance of the pulse. Till very near its close, sleep could be procured by moderate doses of opiates. The appetite gradually failed, and for nearly three weeks previous to the 11th of December, she could hardly take any other nourishment than Dublin porter, of which she drank a pint daily with relish. The pain was sometimes relieved by anodyne external applications, and at other times by those of a stimulating character.

A few days before the 11th of December there was an evident effort at pointing, nearly in the median line, about an inch and a half below

the umbilicus. On that day, with the assistance of Dr. Wm. Read, who had kindly seen her often in consultation, I made an opening at the point indicated, of nearly two inches in length, giving issue to a violent jet of thin greenish pus, in quantity, as nearly as we could judge, more than a pint. With it there came perhaps a teaspoonful of minute grains, brownish in color, which, spread upon a cloth for intended examination by the microscope, and neglected, had in a few hours nearly disappeared, leaving only a faint yellow stain. Nearly three months later similar grains were once observed by the mother. The bystanders were conscious of a very offensive odor at the time of the operations, which had nearly if not quite disappeared on the following day. Dr. Read, who stood near, thought the odor "overpoweringly fæcal." I had no distinct perception of its having that character.

From the last date till the 13th day of March, there was a constant purulent discharge from the wound, slight in amount, not unusually offensive. With the two exceptions above mentioned, there was not during this period any appearance even suggesting the presence of fæcal matter. The patient soon became again able to sleep and to eat. There was for a short time slight irritability of the bladder, especially at night, and she often complained of a pain on attempting to rise or move, which was referred to the neighborhood of Poupert's ligament on the right side, and extended down the course of the crural nerve. There were days when, in trying to stand, her figure was bent almost at a right angle; on other days she could maintain a tolerably erect position. She was able to cross her room slowly, though she could not return till after some 'minutes' rest in the chair. With assistance, she got up stairs at bed-time. She remained excessively emaciated, though she had somewhat gained in vigor and improved in expression of countenance from the time of the opening of the abscess.

On the 13th of March, at the suggestion of Dr. R. M. Hodges, she was etherized and thoroughly examined by that gentleman and myself. A probe, inclined obliquely downwards and outwards from the main opening, penetrated right and left three or four inches, its point being depressed when at the farthest place reached, about an inch from the front of the patient. On examination by the rectum and by the vagina, it was doubtful whether the point of the probe could be detected, though Dr. H. thought that on performing ballottement he obtained obscure indications of its presence. The uterus, normal in size and condition, was placed very high in the vagina, and was with difficulty reached. The anterior sinus was almost obliterated, the posterior quite deep. The body of the uterus was felt prominent in the rectum, but was in no sense altered from its natural size and condition. After the examination, the leading sinuses and one or two fistulous openings which had formed in the neighborhood of the original puncture, were more freely opened and made to communicate.

After that time the discharge of pus from the wound became much more abundant. Her death took place three months later. Twice during that period masses of unquestionably fecal matter made their way through the external opening, the largest one being about an inch long in either direction. Several glands in either groin suppurated and discharged. At the time of the etherization, there was an enlargement about one inch wide and two inches long, situated an inch and a half above the umbilicus and one inch to the right of the median line, which was then the principal source of suffering. It was not possible to demonstrate any connection between this tumor and the main abscess. Eight weeks later a moderate discharge of pus took place at this point, and the tumor rapidly disappeared.

The patient slowly declined with the symptoms usually accompanying an extensive suppurating surface. For some time before her death the lower extremities were in an anasarctous condition. There was delirium during the last two days of life.

No important remedial attempts were ever made.

At the autopsy, there were found in the whole lower half of the abdomen the usual appearances of old and extensive peritoneal inflammation. The intestines were glued together in every direction by firm adhesions. The appendix cæci was firmly attached throughout its whole extent to the cæcum, and presented at its extreme end an irregular perforation, as large as a half-dime piece. There was no other perforation in the course of the intestines. No foreign body could be detected in the cavity of the peritoneum, though it is quite possible that one of small size might have escaped notice. The tumor above the umbilicus to which reference has been made, was shown to have been only a deposit of pus in the cellular tissue of the parietes. The uterus and its appendages were in a healthy condition.

The case here described gave rise in its earlier stages to considerable difference of opinion as to its point of origin; one competent observer referring it to the parts around the uterus, while another was inclined to think that disease of some of the pelvic bones was the source of trouble.

The regularity and natural character of the dejections during the whole course of the disease, seem worthy of notice. Perforation of the appendix cæci is known to be not a very rare affection in this neighborhood, and yet so few cases of it have been publicly reported to the profession, that it appeared desirable to make known the details of even a single instance.

At the late meeting of the American Dental Convention in Saratoga, a gold medal was awarded to Dr. N. W. Kinsley for his invention of a successful appliance in cases of cleft palate.