THE BOSTON MEDICAL AND SURGICAL JOURNAL.

VOL. XCIV. — THURSDAY, FEBRUARY 10, 1876. — NO. 6.

THE CURETTE IN DERMAL THERAPEUTICS.

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FOR the purpose of scraping away the mucous membrane of the uterus in endometritis fungosa, the curette was devised by Récamier and adopted by Nélaton and others.¹ For ulcerated uterine carcinomata with superjacent fungous masses, and for chronic hyperplastic endometritis of the body of the womb, it is now employed by Olshausen and many other gynæcologists.² The form of the instrument employed is usually that of Sims's curette, an improvement upon Récamier's, or Locock and Simpson's "uterine scraper," originally intended more particularly for the removal of the mucous membrane over submucous fibromata, in order to still bleeding.

It is to Volkmann, of Halle, that we owe the introduction of the scoop into the practice of dermatology, in which the superiority of its merits over those of the knife, of the *écraseur*, or of caustics, is in many cases very marked.

Different forms have been given to this instrument by Daniells, Schede, and Simon of Heidelberg. That of Simon, somewhat modified, is the one I prefer. The spoon of the scoop should be oval, its long axis being that of the whole instrument. The edges must be very sharp. The shaft should curve slightly, so that the distal end of the spoon alone rests upon the skin. The spoons should be of different sizes to meet varying indications; the shafts of the same size, that they may be screwed into the handle, which should be large enough to afford a firm hold, and be also somewhat roughened. In this way a handle and from three to six blades or shafts, with scoops of varying sizes, may be carried in a case for the pocket. Codman and Shurtleff have made for me the most exact copies of the foreign instruments furnished them.

For the last three years the dermal curette has been employed in Vienna, and in the *Bericht der Klinik und Abtheilung für Hautkranke des Wiener k. k. Allg. Krankenhauses* for 1874, by Dr. Hans Hebra, the good results of the treatment by means of it of various cases of epi-

¹ Trousseau. *Gazette des Hôpitaux*, No. 21, 1856.

² *Archiv für Gynækologie*, i. page 9.

theliomata, lupus, and especially lupus erythematodes, are given at length.

I have used the scoop as yet in but three cases, two of lupus erythematosus of the face and one of very extensive lupus of the lower leg; in the latter case the patient was etherized. The results have surpassed my anticipations, and in fact left almost nothing to be desired. The time required for the operations was short. The number of operations called for was small. The pain was less than from the use of caustics, and did not last after the conclusion of the scraping process. The time required for a cure was very greatly reduced. There was no expense for medicines. The appearance of the site of the preëxisting disease approximates more nearly to that of its original normal condition than after the use of any caustic. The patients express great satisfaction, one of them saying, "I shall never let any caustic be used upon me again as long as I live."

In the *Wiener medizinische Wochenschrift* for December 18, 1875, Dr. Hans Hebra gives a *résumé* of the results of his three years' experience with the curette in the wards of his father, Professor Hebra, at the royal imperial general hospital of Vienna. The instrument which he uses is made so that the shaft shuts into the handle of the instrument in the manner of a knife-blade.

The indication for the use of the scoop is a large extent of diseased tissue to be removed; small, discrete, pathological formations imbedded in the normal tissue being less well adapted for this method of treatment.

Of the superficial new-formations, epitheliomata are most easily scraped out; next, lupus vulgaris; while lupus erythematosus needs often a more thorough application of strength. There is no danger of scraping away too much; the difference is noticed as soon as healthy tissue is reached. Especially in epitheliomata, also, must great care be taken to thoroughly remove the hard border; otherwise, a return of the disease is to be feared. The bleeding resulting from the use of the curette is usually slight. Wet lint or cotton batting and slight pressure are always sufficient to stop it. There is rarely any fever after the operation.

From two to three days after the scraping a thin, yellow, apparently diphtheritic membrane appears upon the wound, but it means nothing, and results merely from necrosis of particles of tissue which were crushed during the scraping process. In three or four days more this membrane is thrown off, leaving a granulating, healthy wound. If the scraping has been thoroughly effectual, this wound heals with a smooth, soft, rosy cicatrice, a more elegant result than is obtainable from any caustic. For lesions of the face or over joints this procedure is therefore peculiarly adapted, and Dr. Hebra specially mentions cases of lupus over the joints of the fingers, where, after scraping and cicatrization, the

mobility of each individual inter-phalangeal articulation was absolutely perfect.

The scoop may also be employed in the treatment of other diseases of the skin as well as for new-formations. Thus, the elevated, circumscribed, infiltrated patches of chronic eczema may often be with advantage removed in this manner. The callosities of dissectors, butchers, tanners, etc., occurring usually on the backs of the fingers or hands, and yielding but slowly to other remedies, are speedily removed by the curette. Small new spots of psoriasis may be thus removed, and the spread of the disease, as far at least as these foci are concerned, is obviated. Still, relapses are possible. Even old cases of sycosis with much pustulation and papillary hypertrophy may be healed more quickly than by any other means, if the scoop is employed to remove excrescences, and thus open avenues of exit for the deep-seated pus. For the enlarged sebaceous glands of the nose and forehead following severe attacks of variola, and leading at times to lupus erythematodes, the curette may also be used, preferably soon after convalescence from the variola, and the whole tract affected, together with its scars, may be removed with the result of an improvement in the personal appearance. So also in cases of acne vulgaris and rosacea, when specially severe. In various kinds of ulcers, also, the use of the scoop is particularly indicated. Varicose ulcers of the leg often yield more readily to this treatment than to any other; so, too, strumous swellings of the skin and glands. In cases of scrofulous suppurative adenitis the adjacent healthy skin may be preserved by cutting an aperture over the gland with scissors, provided none already exists, and then scraping out the entire gland-capsule with a small curette.

In all these cases we have had to deal with lesions where the epidermis was in an abnormal condition. But the scoop is adapted as well to another group of affections of the skin, namely, lesions due to excess of growth, but in which the epidermis remains uninjured. Thus, warty or hypertrophic nævi and pigment-stains, if small, may be removed at one sitting; if they are large, it is better to destroy a part only at once, thus causing less irritation and producing a cicatrice more closely resembling the normal skin. Vitiligoidea plana or xanthoma palpebrarum is best removed by a small pointed spoon inserted under the epidermis through an aperture artificially made. In this way the entire formation may be removed without loss of blood and without causing the slightest ectropion. Dr. Hebra mentions a case of teleangiectasy thus treated. To his great surprise the loss of blood was very slight, and the bright red spot became much paler after one moderate scraping, which could not, however, be repeated, as the patient, who was in the hospital for another disease, recovered and left.

Many venereal and syphilitic lesions, also, may be treated with ad

vantage by means of the curette. Pointed condylomata, if removed by scissors, return speedily if too little has been snipped away, and if too much is removed, there is a needless loss of substance. The use of the scoop obviates either danger. The base must be thoroughly scraped out. The consequent bleeding not infrequently calls for the employment of some styptic. Broad syphilitic condylomata, from the softness of their component tissues, can be speedily removed. The cure is as speedy from the use of the curette as by any other means, and the severe local pain and inflammatory œdema, as well as the possibility of salivation from mercurial applications, are in this way avoided. Syphilitic ulcerations, like others, often yield most readily to this treatment.

Many other conditions might easily be cited in which the use of the curette would be indicated, but we have said enough to call the attention of the profession to a means of treatment easy of application, cheap, as painless as possible, and giving more speedy and better results than any other as yet known.

MESSAGE IN AMENORRHŒA AND DYSMENORRHŒA.

BY DOUGLAS GRAHAM, M. D., OF BOSTON.

CASE I. At fourteen years of age, Miss — began to menstruate, and this function continued to recur for three years and a half, but was always from ten days to three weeks too late. The menses then ceased for two years and a half, and no local cause could be discovered to account for the interruption. During this interval, tonics, emmenagogues, horseback riding, and a year's travel in Europe were tried, but apparently without effect. Though the physical condition of the patient seemed to be good, — her body well nourished, her complexion ruddy, her sleep and appetite fair, — yet she became more and more low-spirited. For this condition she, or rather her relatives, sought the advice of Dr. Tyler. He at once advised a thorough trial of massage.

In January, 1875, when I began giving her massage, the patient had been in the habit of walking two or three miles daily in suitable weather; but it was only from a sense of duty, and with great effort and disinclination that she did anything, physical or mental. There were no sanguine expectations on her part of benefit from any treatment whatever.

The mode of procedure was manipulation of the whole body, with percussion of the back, resisting movements (acto-passive motion) of the feet, legs, and thighs in all their natural directions, particularly those of abduction and adduction; this treatment was administered every other day. After seven applications of massage, the menses came, and lasted three days, though rather scanty, having been suspended for two years and a