SCIRRHUS OF THE BREAST—CASES, &c.

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Messrs. Editors,—Having had some little experience in the treatment and removal of scirrhus tumors of the breast, by your permission I will present your readers with a brief report of the cases which I have had, the treatment, and the result of each case so far as time has developed it in reference to them.

CASE I.—In the autumn of 1848 I was called to visit Mrs. C., of Limerick, York Co., a lady about 60 years of age, who had a large scirrhus tumor upon the left side of the chest, involving, besides the mammary gland, all the soft parts about the breast; the circumference of the tumor being about twenty-five inches, and rising up some two and a half inches above the surface of the chest. The ulcerative process and granulations having been going on for more than a year, and the discharge being very abundant, the patient was much reduced as to strength, and the factor so great that life was truly a burden to her, especially in view of the sufferings which threatened to intervene before death should release her from them. She was accordingly very anxious for the removal of the tumor. But as there was evidence already of an enlarged and diseased state of the glands of the bowels, I was unwilling to attempt the operation, knowing full well that should the tumor be removed, and the wound heal up in due time, the disease would develop itself shortly in the bowels. But by the earnest entreaty of the patient and her friends, and the advice of the attending family physician, I removed the tumor, which weighed three pounds seven ounces.

The patient endured the operation well, and the wound, as large as it was, healed kindly in about six weeks after the operation. I gave the patient tonic bitters, bark and wine, taking care that the functions of the liver, bowels, kidneys and skin were duly performed. Under this treatment she apparently convalesced rapidly, left her sick-room, and assumed the care of her family, and it was generally supposed that a cure had been effected. In about twenty months, however, she was seized with diarrhœa, and rapidly run down, the bowels becoming tumid and tender upon pressure. Soon an effusion of water took place into the peritoneal cavity, and being relieved for a short time by paracentesis, she finally sank, expressing, however, to the last, her thankfulness that the operation was performed, inasmuch as she was relieved by it of the pain she had previously suffered, and the disagreeable stench of the tumor.

CASE II.—The same autumn I removed a scirrhus breast from Mrs. B——, of Hollis, aged about 55. The tumor was quite large, but not attached to the integument or to the subjacent tissue. It had been somewhat painful, and was quite sore upon pressure. As it was connected with the mammary gland, I removed it with the tumor, and also some enlarged glands between the tumor and the axilla. The wound healed kindly. The patient took some preparations of iodine, iodide of potassa, &c., and has occasionally resorted to some alterative medicines since. Up to this date, I believe the disease has not shown itself anywhere else in the body.

CASE III.—In June, 1849, I removed a scirrhus tumor with the breast from Miss B——, of Windham, aged 20 years. The whole glandular system seemed to sympathize in this case, although no other gland was permanently enlarged at the time of the operation. The wound healed kindly, and the patient was treated as was case No. II., and there has been no appearance of the disease since.

CASE IV.—In March, 1850, I removed a tumor just below the right breast of Miss B——, of Limerick, aged 50 years. This patient had been tampered with for two years by the application of the caustic potash, but “grew no better, but rather the worse.” The tumor when I removed it was as large as a pint bowl. There was a very profuse discharge from it. The glands in the axilla were enlarged, and I dissected them out. The wound healed up readily, although the patient’s general health at the time of the operation appeared to be very poor, her countenance being pale and pallid. By the use of bark and wine, and other tonics, her general health greatly improved, and it is now good, the disease never having shown itself anywhere else.

CASE V.—In June, 1850, I removed a scirrhus tumor with the left breast from Miss R——, of Standish, aged about 25 years. This case resembled Case III. in every essential particular. It was treated in the same way; but as the patient had always had an eruption upon the skin, I advised a seton in the side, issues, &c. The wound healed in due time. The patient was soon after married, has had one child, and has not as yet been troubled with a return of the disease.

CASE VI.—In September, 1851, I was called to remove a scirrhus tumor from the axilla of a lady, Mrs. L——, of Windham. She had, not a year previously, had the breast removed by another surgeon. The glands of the axilla were not then apparently diseased, though the result showed that it would have been safer to have removed them at the same time. I removed this tumor safely, although it was deeply imbedded in the axilla, filling the whole space, raising the arm by its size, and being strongly attached to the ribs, intercostal muscles, and also to the axillary vessels and nerve. This wound healed kindly; but in a few months another tumor appeared, somewhat remote from the axilla, in the cicatrix of the wound made by the removal of the breast. I removed that, and since then the disease has not developed itself anywhere else. The patient is robust and apparently healthy.

CASE VII.—In July, 1852, I removed a scirrhus tumor from the breast of Miss M——, of Scarborough, aged 27 years. Her general health was poor, and I found it necessary to give tonics and corrective medicines, some two or three weeks previous to the operation. As all the glands in the axilla and between the axilla and breast were somewhat enlarged and sensitive, I removed them. The wound healed well, and the patient’s general health has greatly improved; her mind is much relieved, and there is now no appearance of a return of the disease.

CASE VIII.—April 22d, 1853, I removed a scirrhus tumor from the breast of Mrs. C——, of Windham, aged 51. The tumor was about the size of a hen’s egg, attached to the integument over it as usual, but not to the muscle below. I removed the tumor, mammary gland, and

all the lymphatic glands in the axilla and between the axilla and breast. The usual symptoms had attended this case. The wound healed as usual. The patient has taken iodine and other medicines, and appears to enjoy good health, with no signs of return of the disease as yet.

CASE IX.—June 8th, 1853, I removed a scirrhus tumor, the mammary gland, and diseased lymphatic glands, in the vicinity of the tumor, from the right side of Mrs. B——, of Gorham, aged 26 years. The tumor, though small, was quite painful, and the patient suffered extremely from the fear of having a cancer of the breast. After performing the operation, I adopted the medical treatment alluded to in previous cases. The wound healed soon, and the patient has enjoyed good health since, and there is not as yet any appearance of the return of the disease.

My observations and reflections upon the cases above related have led me to the following conclusions :—

1st. That scirrhus of the lymphatic glands is a disease *peculiar* to females, and that its nature or origin is in some way connected with, or rather is the result of, some irregularity or suppression of the catamenial discharge. In every case I have seen, the enlargement of the gland was first perceived either about the “turn of life,” as it is called, or when there had been an irregularity, a partial or total suppression of this important evacuation from the system, from some constitutional or accidental causes.

2d. The *timely* removal of the scirrhus gland with the knife, with all those glands in its immediate vicinity which seem, from sympathy or proximity, to have imbibed the same disease, or, to say the least, are predisposed to put on the same form of it; with proper constitutional treatment, designed to purify, strengthen, and invigorate the system, will greatly *postpone* the further development of the disease in the system, and in perhaps about *two fifths* of the cases which occur before the age of *thirty years*, will effect a permanent cure. In such cases, where the general health can be *improved*, so that all the functions of the body shall be naturally performed, the prospect of a cure is much greater than where such changes cannot occur, as is the case after the menstrual period has fully passed. By a *timely* removal of the gland, I mean that the operation should be performed before the inflammatory stage, or the tumor has commenced its peculiar discharge. As soon as the discharge commences, and which does not occur, in my opinion, until the system has become prepared for it by the depressing causes which occasion the disease itself, all the glands in the body will be more or less affected, and an operation under such circumstances can only postpone the development of the disease for a brief period.

With these views of the subject I should in all cases, especially where the patient was anxious for it, recommend the exsection of the diseased gland, and the adoption of proper constitutional treatment, with the hope that if performed early, as before suggested, in *some cases* a permanent cure might be effected; and in others the development of the disease might be greatly deferred. The mind of the patient is generally much relieved after the removal of the tumor, which is an important consideration in such cases.

JAMES M. BUZZELL.

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