SELECT CLINICAL REPORTS.
(Under this heading are recorded, singly or in groups, cases to which a special interest attaches either from their unusual character or from being, in a special sense, typical examples of their class.)

I.
Three Cases of Epithelioma of the Vulva with the After-Histories.*

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Case I. P.J., a married woman, aet. 47, was admitted into the London Hospital on the 5th December, 1896.

She had been married 24 years and had had five children—the last 11 years previously—also 3 miscarriages—the last 8 years previously.

The catamenia had been regular every 4 weeks until the beginning of 1896. From January to March "nothing was seen," and she had thought herself pregnant. Two normal periods, however, followed in April and May. Since that time there had been amenorrhoea up to the time of her admission.

Her father died at 72 of apoplexy; her mother is still alive, aet. 51.

She was born in Bristol, and lived there till she married in 1873. She had lived all her married life in the East of London. At about the age of 18, she suffered from marked debility, and about that time also is said to have had typhus fever. After the birth of the second child in 1877 she had an attack of eczema affecting the soles and the palms, which lasted six months; and another attack of it, lasting about four months during her third pregnancy in 1879. She appeared also to have suffered from attacks during the 7 years prior to her admission.

She was perfectly well up to September 1895. She then had a swelling equal in size to a hen's egg underneath the left knee, and at the same time she had a bad bilious attack. She was treated for this, and the swelling disappeared. During the same months some small warts made their appearance—5 on the back of the left hand, 5 on the right cheek, and 3 on the right labium majus. Those on the hand and cheek were scraped away by the patient herself with the finger nail, and the scars left from this looked like small burns.

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Since that time all traces of the warts on the cheek and on the hand had disappeared. The warts on the vulva, however, had remained; they were quite small until July, 1896; then they began to increase in size, and finally they coalesced, forming a single patch. There was little or no pain until ulceration occurred, which was about the beginning of October, 1896.

On admission, she complained of a sore place on the external genitals, of a dragging pain in the right groin, and of shooting pains, like knives, in the external parts.

On the right side of the vulva there was seen an ulcerated surface of an oval shape, measuring two inches long by one inch broad. The edge was raised and somewhat everted. The patch was very markedly indurated. The skin up to the edge of the growth was normal. The ulcer involved the right labium minus slightly. The glands in the right groin could be felt, but were not markedly enlarged. On vaginal examination nothing abnormal was detected.

I saw her first on the 29th of October, 1896, and for the second time on the 3rd of December. The sore place on the external genitals had in the interval rapidly increased in size, and she was advised to come into the Hospital for operation.

Operation, December 7th, 1896. The oval patch on the right labium was freely removed by means of Paquelin's cautery; a fair margin of apparently healthy tissue around it being taken away at the same time. The wound was dressed with iodoform gauze, and left to granulate. At the same time the glands in the right groin were removed.

The patient did quite well, and left the Hospital on the 2nd January, 1897.

Re-admitted December 9th, 1898, complaining of a small growth on the external genitals. This second growth began as a small pimple, which was first noticed in the previous September, and had increased slowly, as compared with the former growth, up to the date of her re-admission. The patient's attention was drawn to the pimple by noticing a slight, reddish discharge. Previous to this, she had "seen nothing" for 18 months.

On examination, a small growth the size of a cobnut was seen on the left side of the vulva. The growth was hard and movable, and rather tender when touched.

She was anesthetized on the 11th December, 1898, and the nodule freely excised with Paquelin's cautery. No enlarged glands were felt in the left groin, and nothing further was done.

She went out on the 23rd December, 1898.
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Re-admitted January 26th, 1899. She was re-admitted on this date for the purpose of having the glands in the left groin removed.

This was done on January 28th, 1899. The wound left by the operation on December 11th, 1898, had not quite healed, and the surface of it was hard, and bled readily. This portion of tissue was therefore excised with the cautery, and the base of the wound left was also freely cauterized.

The patient went out on February 17th, 1899. The wounds were then soundly healed.

Re-admitted March 7th, 1901. For the preceding few days she had noticed soreness and irritation about the vulva, and there had been a slight discharge containing blood. She also had had some pain on micturition because the urine caused the sore place in the vulva to smart.

(I had seen her 3 months before she was re-admitted, and there was then no evidence of recurrence.)

On the left side on the inner surface of the labium majus there was now a red patch about the size of a three-penny piece. It was very tender. Further, towards the middle line, there were two small nodules equal in size to a pin's head. On the right side the skin was excoriated and tender where in contact with the growth on the left side. Very little infiltration was felt around the growth. No enlarged glands were felt.

On March 9th the patch described was freely excised with Paquelin's cautery, and the adjacent raw surfaces were also freely cauterized.

To summarize the operations:—

The first operation was on December 7th, 1896. At this the growth in the vulva was removed and also the glands in the right groin.

The second operation was on December 11th, 1898. At this a growth in the vulva was removed.

The third operation was on January 28th, 1899. At this the tissue in the region of the wound, which had not healed and was hard and suspicious-looking, was removed, and also the glands in the left groin.

The fourth operation was on March 9th, 1901. At this a recurrent patch in the vulva was removed.

Since that time I have seen the patient occasionally and examined her, and on each occasion she has been quite well, with no sign of recurrence. The last occasion on which I examined her was March 8th, 1906—five years almost to the day since the date of her fourth and last operation.
Microscopical examination of the growth showed it to be a squamous-celled epithelioma.

Case II. E.E., a married woman at 52, was sent to me by Dr. Jacobs, of Lee, on August 28th, 1899.

She had been married 27 years, and had had four children, the last 11 years previously, also 2 or 3 miscarriages—all before the date of the last confinement.

She complained of having had a "peculiar swelling" and "appearance" about the private parts for some months. She had had pain in the region of the swelling for eight weeks, and a brownish-yellow discharge for about the same time. Micturition had also been painful for a few weeks. The catamenia had always been regular every four weeks, lasting five days, and the loss had been rather profuse, more especially the last few years. She did not think she had become thinner.

Her father died of cancer of the liver.

On examination, a rounded projecting growth was seen in the region of the glans clitoridis, slightly to the right of the middle line. Its surface was slightly warty, and the growth was superficially ulcerated. The growth measured one inch from before backwards, and two-thirds of an inch transversely. The upper portion of the growth was separated from the lower portion by a deep natural fissure, which was not ulcerated. The growth was hard and dusky red where ulcerated. It did not bleed very readily on being touched. Its base seemed quite free from the subjacent tissues. The skin of the vulva within the labia majora, as far back as the termination of the nymphae, was whitish, and had a macerated appearance. The glands in the right groin could be distinctly felt; two or three of them seemed enlarged. One enlarged gland was felt in the left groin.

The patient was admitted into the London Hospital for operation on August 30th, 1899. Her weight on admission was 7 st. 13 lbs.

Operation, September 1st, 1899. The projecting growth above described was lifted up, and freely dissected from its surroundings with Paquelin's cautery, a portion of apparently healthy skin and tissue being removed with the growth in each direction. The wound so made was freely cauterized. The glands were also removed from both groins.

The patient left the Hospital on September 23rd, 1899.

Subsequent History. I saw this patient several times during the 18 months after her operation—the last occasion being on February 2nd, 1901. Her weight then was 8 st. 6 lbs. 6 oz. At that time the external genitals seemed quite healthy, and no sign of any growth could be found in the groins or elsewhere.
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I was afraid I had lost sight of her, as she had removed from where she was living at the time of the operation, but, through the kindness of Dr. Jacobs, I obtained her present address. In a letter to me, dated March 11th, 1906, she says: "I have not been troubled at all again with my old complaint, and my general health is on the whole good."

In this case, therefore, the interval without recurrence is six years and a half.

Microscopical examination of the growth showed it to be a squamous-celled epithelioma.

Case III. A.F., a married woman, æt. 34, was admitted into the London Hospital on March 16th, 1905. She had been married 10 years, and had had two children (the last five years previously) and no miscarriages.

She had first noticed a small lump in the private parts between September and November, 1904; it was then about the size of a hazel-nut. For one month the lump grew rapidly, and spread till it attained the size of a five shilling piece. She had had some pain on micturition at first, but none lately. She had always had some slight, blood-stained discharge since the lump was first noticed. There had been no similar sores elsewhere. There had been no rash, loss of hair, or sore throat. The lump had been painful at times.

The catamenia began at 16, and were quite regular every 28 days till the beginning of July, 1904, since when she had "seen nothing." She believed herself to be 8 months pregnant.

On admission, the gravid uterus occupied the greater part of the abdomen, its size corresponding to that of an 8 months' pregnancy.

On the posterior part of the right labium majus there was seen a red, raised, kidney-shaped patch, superficially ulcerated, measuring 2½ by 1½ inches. It had a raised, everted edge, with a fair amount of induration around it. The patch also involved the fourchette. Some enlarged glands were felt in the left groin, parallel with Poupart's ligament; but no glands felt in Scarpa's triangle. On the right side enlarged glands were felt in both positions.

On March 20th a bright papillary rash was seen on both cheeks and on the forehead.

March 28th. The patient has had 11 days' treatment with hyd. c. cret. gr. i. 4 times a day. The patch on the vulva is unaffected. Enlarged glands are felt in Scarpa's triangle on the right side running parallel with vessels.

Operation, March 31st, 1905. I cut out the patch widely with Paquelin's cautery, many vessels requiring ligature, and many
encircling sutures of catgut being also used to control the bleeding. I thoroughly cauterized the base and edges of skin adjacent to the wound. Sections of the growth showed it to be a squamous-celled epithelioma.

April 4th, 1905. Labour came on, and she was normally delivered of a living male child.

On May 4th, 1905, the glands in both groins and in Scarpas triangle were removed. Those on the right side were obviously affected, and those on the left were apparently not affected. These wounds healed well.

The patient was discharged on May 5th, 1905.

Re-admitted June 19th, 1905. The scars in the groins were healthy. There was local recurrence in the region of the right labium majus. The growth measured 2 inches by an inch and a half. Its inner part involved the vestibule, and the frænum and prepuce of the clitoris. The growth was freely excised on June 20th with Paquelin's cautery and left to granulate.

On July 4th the surface was granulating satisfactorily; no hard area was felt. The patient was discharged on July 8th.

I never saw her again, but the Sister of the ward heard she had died with recurrence within three or four months of leaving the Hospital. She had been in Hospital again for treatment with X-rays under Dr. Sequeira from August 11th to September 9th without benefit.

Remarks. The history of Case i. shows very well that local recurrence in cases of epithelioma of the vulva is not necessarily of unfavourable significance. As three operations were performed on recurrent patches in the vulva subsequent to the first, at intervals of about two years as regards the second and fourth, yet an interval of five years without any sign of recurrence has followed the fourth operation. Such a history is in striking contrast to what is met with when recurrence takes place after radical operations for cancer of the cervix. In the latter disease the first operation is the only one likely to be productive of prolonged or permanent benefit. Little or no benefit is likely to follow operative treatment if the disease has once recurred.

As regards Case ii., there was only one operation, and this has been followed by six years and a half without recurrence.

Case iii. is remarkable in being an instance of epithelioma of the vulva occurring in a patient only 34 years of age. The progress of the disease was unusually rapid in spite of what appeared to be a complete removal of the growth on two occasions, and in
spite of the removal of the lymphatic glands on both sides. The whole course of the disease, from the time when it was first noticed until the fatal termination, only covered a period of about 12 months. It seems probable that in this case the pregnancy may have exerted an unfavourable effect on the disease, stimulating it to an unusually rapid progress. Incidentally it may be noticed how the first operation was followed by the occurrence of labour four days later as showing how likely labour is to be induced by slight operations on the external genitals. This effect was regarded as extremely probable, but the operation was undertaken nevertheless, as the patient was eight months pregnant, and it was evidently necessary to remove the growth without delay. This case is also an example of a superficial carcinoma not at all improved by the X-ray treatment. From the accessible position of the growth it appeared to be rather a favourable case for this particular form of treatment.

It will have been noticed that in all these cases Paquelin's cautery was used in removing the growth from the vulva. I think it is a better instrument for the purpose than the knife or scissors. The subsequent sloughing must be an advantage in removing possible outlying islets of growth that would probably escape removal in performing a neat operation with the knife to be followed by primary union.