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A CASE OF FRACTURED SPINE, WITH DEPRESSION OF THE SPINOUS PROCESS, AND THE OPERATION FOR ITS REMOVAL.

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THIS case occurred on the 3d of February, 1834, in the person of a Mr. Little, aged thirty-one years, who fell from the roof of a three story house (as is supposed), upon a coal box, which fractured the spinous process of the first lumbar vertebræ, and depressed this process upon the spinal cord; a space was distinctly felt between the last dorsal and second lumbar vertebræ. He presented those symptoms, paralysis and suffering, which are familiar to surgeons in such cases. After reaction was fully established, the paralysis of the lower extremities continuing, with other distressing symptoms, it was determined to remove the depressed process.

Operation.—The patient was laid upon a cot, and placed on his side, as symptoms of suffocation were produced when lying on the face. The shoulders and hips were carried forward, which caused a projection of the spine; an incision of about five inches in length was made, in the direction of the spine; several fragments of bone, broken from the spinous process of the last dorsal vertebræ, presented, which were removed. From the comminuted state of the depressed process, it was thought that it could be removed without the saw, and in elevating it, every part was detached except at the oblique processes. An attempt was made to separate these with the knife alone, but without success; Hey's saw of small size was now employed, but the mobility of the part rendered this a tedious and difficult part of the operation; the irregular edges of the bone occasionally coming in contact with the spinal cord, caused excruciating pain, accompanied with convulsive contractions of the muscles of the back; with the aid of the double hook and elevator it was fixed, and by gently sawing, it was separated on one side, but could not by this mode be detached from the other side. Again the knife was used, and the capsular ligament was divided from the outside; the process was then drawn upwards and outwards, so that the probe-pointed bistoury might pass between the articulating surfaces, which completely separated its attachments. About two inches of the spinal cord was now exposed, covered with coagulated blood, quite firm; this was removed with the forceps. The spinal cord did not seem to be injured. The wound was drawn together by a suture, and adhesive strips, with a bandage. The patient was laid upon a firm matrass, on his back. In about fifteen minutes after the operation, he said he was much relieved; sensibility

returned to the lower extremities ; respiration became easy, and with the assistance of an anodyne, he slept for several hours.

The above operation was performed on the morning of the 5th of February, 1834. At 8, P. M., of the same day, he complained for the first time of pain in his feet, and a difficulty in passing his urine. A catheter was introduced, and about a quart of urine discharged. Gave him lemonade and gum Arabic water for the night.

February 6th, morning.—Has rested well during the night ; complains much of pain in his feet ; they are highly inflamed and vesicated ; twelve leeches applied to them ; skin dry. Pulse 106. Ordered spirit minde-rer. 7 o'clock, P. M. Pulse much excited ; skin dry ; complains of pain in the wound ; turned him on his side, which gave much relief ; was directed to take at bed time, proto-chloride hydrarg. grs. vi. ; Pulv. ipecac. compos. grs. x. M. The lemonade omitted for the night. Warm fomentations to the feet.

7th, morning.—Rested well a part of the night ; complains of pressure about the wound. Pulse 100, and tense. Bladder much distended with urine. Bled him ten ounces, when he became faint. 7, P. M. Was much relieved by the bleeding ; slept several hours during the day ; urine drawn off twice to-day. Ordered pulv. ipecac. comp. grs. x. at bed time.

8th, morning.—Vomited during the night, which caused much distress in the wound ; no discharge having taken place from the bowels since the operation, notwithstanding several injections had been given, he was directed to take ol. ricini, 3j. ; tinct. opii. gtt. xx. and effervescing draught. 7, P. M. Cathartic has not operated.

9th, morning.—The cathartic has operated several times during the night ; says he is free from pain. Pulse 98, and soft. The wound in the back dressed, has in part closed ; granulations seem healthy.

10th, morning.—By the aid of anodynes he rested well for the night ; skin moist ; pulse 98 ; the right foot had lost its sensation, much tumefied ; crepitation was felt on the ankle, resembling emphysema. Dr. R. being satisfied that gangrene had commenced in the foot, he immediately made an incision in the part from below the inner ankle to the great toe, down through the distended cellular tissue. The whole of the foot was gangrenous, extending above the ankle. The nitric acid lotion was applied with lint, and the part covered with a poultice. He was directed to take gun opii. gr. ss. and carb. ammonia grs. ij. every two hours.

11th, morning.—Delirium ; refused his medicine ; gangrene extended ; made deep scarifications into the sound parts ; continued the same dressings as yesterday. Directed arrowroot, with wine and porter.

12th, morning.—Is more composed this morning ; slept several hours during the night ; took his medicine regularly. The soft parts about the foot have separated from the bones, most of which are in a state of comminuted fracture.

13th, morning.—Delirium returned ; extremities cold ; pulse hardly perceptible at the wrist. Died in the afternoon.

Post-mortem examination, twelve hours after death.—Viscera of the abdomen healthy ; the membranes surrounding the viscera had a dark appearance from extravasated blood. The wound on the back was about

half closed by healthy granulations. The bones of the spine retained their relative situation. The first lumbar vertebra, from which the spinous process had been removed, was fractured through its body, but no displacement. The spinal cord seemed in a healthy condition.

Dr. Rogers makes the following remarks :—Although in all the cases of depression of the spinous processes in which an operation has been performed it has proved fatal, yet he is well satisfied that this case presents a strong argument in favor of repeating the operation under similar circumstances. The immediate return of sensation to the inferior extremities after the removal of the bone, with complete relief from all symptoms which indicate an injury of the spine, from the time of the operation to his death, form presumptive evidence in favor of his ultimate recovery, had it not been for the injury and gangrene of the foot. Dr. R. thinks that in a case of simple fracture and depression of the spinous process, without any injury of the spinal cord, we have a reasonable prospect of success in an operation ; at all events, it is the only chance for the patient, and under such circumstances he recommends it.

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ACUTE RHEUMATISM.

DEMONSTRATION OF THE MODE IN WHICH THE PREPARATIONS OF COLCHICUM PROVE USEFUL.

BY PROFESSOR A. T. THOMSON, OF THE NORTH LONDON HOSPITAL.

THE number of cases of acute rheumatism which has been admitted within the last twelve days, has again turned our attention to this disease: but I shall now direct your notice merely to one of these cases, not because the symptoms have displayed any peculiarity, but because the rapidity of the relief which followed the operation of the colchicum upon the alimentary canal, affords me an opportunity of explaining my opinions of the manner in which this valuable remedy usually produces beneficial effects in rheumatic inflammation. It has been customary to refer these effects of colchicum to its sedative or narcotic powers ; an opinion which my experience prevents me from adopting ; but in dissenting from this view of the influence of colchicum, I am anxious that I shall not be misunderstood as attempting to deny that it possesses sedative powers ; although I have never seen these adequate to the production of permanent relief from pain in acute rheumatism. If a full dose of the wine of the seeds of the colchicum be administered after a moderate bleeding, it rarely fails to purge, and to maintain the reduction of the pulse caused by the abstraction of the blood. Under such circumstances it would be remarkable if there was no abatement of pain, if the system be brought under the influence of even a very moderate sedative. The purgative influence of the colchicum carries its sedative power, although weak, thus far, whilst it precludes the further employment of the lancet ; and thus it seems to combine the advantages of purging, and the administration of narcotics. Now in taking this view of the influence of colchicum, I am convinced that it is never productive of much benefit in acute rheu-