

oesophagoscopies will be done with cocaine anesthesia, in the sitting posture, and Brunings' bronchoscopes serve admirably for the purpose.

Finally, a very practical and indeed serious objection in broncho-oesophagoscopy with Jackson's instruments to most of us is the fact that to work properly, as is shown in Dr. Jackson's book, and as one soon finds from actual experience, at least two trained assistants are required and perhaps a nurse or two in addition. One of these assistants must hand instruments and sponges to the operator and the other has the very important task—so essential to successful bronchoscopy with the Jackson instruments—of holding the patient's head in the proper position, called the "Boyce position." It isn't always convenient to have these assistants and especially to have one who understands holding the head properly, and I want to say that if this latter is not done the introduction of the Jackson bronchoscope is no easily accomplished task. On the other hand, with Brunings' instruments, almost any position will do, the favorite one for me being to have the patient, if a child and under a general anesthetic, on the side, with head drawn back, and this really requires no one besides the anesthetist and a nurse to hand the operator sponges and instruments. If the patient is an adult and cocaine anesthesia is used, two nurses, one to support the head of the patient, who sits upright in a chair, and the other to attend to the instruments, are all that are needed. The first time I attempted a bronchoscopy with Brunings' instruments, which was a practice case picked up in a clinic, I had only an orderly in the clinic to help me, and did the bronchoscopy successfully. Not so, however, with my first experience with Jackson's instruments, for here, with several assistants, but untrained ones, the attempt was a failure, for the very simple, but essentially good, reason that I couldn't get the head held properly.

But, again, the difficulties encountered by me may have been due to my faulty technic, and future experience may find me aligned with the users of Jackson's instruments exclusively. Certain it is that had I one-half the technical skill with his instruments that Jackson possesses I should use none other.

Under no circumstances, however, is bronchoscopy to be regarded as easy of performance and danger free, and the simpler and less tedious the instruments and technic required, the better it is for the patient and the happier the operator.

Memphis Trust Building.

REMOVAL OF SUPERFLUOUS SKIN AROUND NECK FOR RELIEF OF HEADACHE. REPORT OF A CASE.

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It is with some little degree of hesitancy that I report this case of unusual cure of headache by operative procedure, for unless the cure is due to the support given the circulation in the skin of the neck I hardly know to what to attribute it. Still, I want the profession to know of the case and take it for what it is worth.

The case is that of a man, white, married, aged 48, and a physician by profession. At about the age of thirty he began to suffer from attacks diagnosed as acute indigestion. Pain in abdomen would become so severe at times that opiates had to be administered to allay the suffering. This condition continued for about five years, except that the paroxysms were lessened both in severity and frequency by dieting, and the use of predigestants. After this continued off and on for several years he had an attack of acute gastro-enteritis, which in spite of everything done became chronic in character.

After a time the headaches began to accompany his indigestion; they finally became so severe that they rendered him almost incapable to attend to his professional duties; he even had to give up his practice altogether, except for a little office work. These headaches would come on about twice a week, lasting from one-half to three days, no treatment seeming to be of any benefit except hot applications to the head, and this would take several hours to do much good and rarely gave complete relief. On one occasion patient was suffering so intensely that he fell across the bed and unconsciously grasped the back of his neck with his right hand and began to make pressure. Much to his surprise in about ten minutes the pain had almost ceased. This was repeated during the second attack, also the third, with the same pleasing results. When pressure was removed the pain would gradually return until it would be as severe as it was at first. Another thing which should be mentioned was that any straining or lifting, or sudden excitement would bring on the headache.

The patient was a medical student here last winter, having come here for the session in order

to freshen up a little in his profession, and while here consulted several of the doctors in regard to his case. He came to me in the early spring, and I put him on a diet and treated his indigestion, which I took to be both gastric and intestinal, hoping in this way to aid his digestive disorders and to relieve his pains in the head.

There was some improvement in his digestion, but the headaches were about as usual. The urine was examined to try to find trouble in the kidneys, but they were found in good condition, as were the other organs not before mentioned. I had noticed the relaxed condition of the skin of the neck, but never thought of connecting that with his headaches until I could find no other cause for his suffering, then I began to think that probably it would give relief to operate and remove this superfluous skin, inasmuch as he had found temporary relief by grasping the skin in his hand and tightening it around his neck.

After the usual preparations I operated under general anesthetic. Starting my incisions at the junction of the middle and anterior thirds of the superior curved line of the occipital bone, I removed an elliptical piece of skin four inches long and an inch wide in the greatest width on each side of the neck, ligated the necessary bleeding points and closed my wounds with catgut.

Patient made a quick recovery, and I saw little of him for several weeks, then he came again to tell me of the benefits of what had been done, and requested that I operate again and remove the remaining loose skin about the neck. This was done as before, except the two pieces of skin were removed from the front of the neck, pieces of about the same dimensions as those in the first operation. Patient again had no trouble after operation and soon returned to his work, reporting back now that his old headaches are a thing of the past. He writes. "Am truly glad to state that I have not had the old headache since the last operation, it proving quite a success in every particular." He says, though, that he has "a sick headache occasionally when he doesn't properly watch his indigestion and lets himself become constipated."

I saw nothing in the condition of the skin worth note, except that it was very freely supplied with blood, and after going through my text-books trying to find something on the subject, I consulted Dr. Marcus Haase, one of our dermatologists, to learn if there was such a pathological condition recognized by the profession as relaxed, loose or flabby skin and he assured me there was not.

The question now arises as to what caused the

cure of the patient. I am of the opinion that removing the four pieces of skin from the neck tightened up the skin enough to support the circulation there, just as an elastic stocking gives support to the varicose veins in the leg and gives some relief to the sufferer of that pathological condition.

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PHYSICIANS NEED NOT FEAR PROGRESS.*

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The most striking lesson in the history of civilization is man need not fear progress. "Our little systems have their day; they have their day and cease to be." From the ashes of former systems, phoenix-like, a hundred others arise. Knowledge grows with increasing purpose. One mystery solved reveals others. Discoveries open a larger perspective. Opportunities for achievements increase with the process of the suns. There will be always an incentive to the development of new activities and the application of man's intelligence. Equally, there will always be men who would sail "beyond the paths of the western stars." The "call" of knowledge will obtain throughout all ages.

Looking backward, it is clear that progress in science, in law, in government, in education, in commerce, has made for betterment in the condition both of the individual unit and the social whole. That advancement came often at the expense of vital force, often of life itself, is incidental to the development. Nature destroys fifty seeds that one may come to life. In social activities there must be similar apparent waste.

In the period of transition before new knowledge becomes a part of the public mind, there is antagonism. Because the average Athenian politician of his day was not convinced, Socrates drank the fatal hemlock. Savonarola was executed for heresy. The annals of social growth are filled with similar examples. The history of medicine is no exception.

The professional man himself is naturally conservative. His training gives him a respect for the essentials of knowledge; the fundamental principles of human action which have come through the ages. He thinks and works with intensity, integrity, breadth and thoroughness. His method

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