

sembling croup; but not (it would appear) leading to the formation of the false membrane, so peculiarly characteristic of that disease. Had the foreign body been even coughed up, the resulting inflammation might still render the case subject for operation, like those instances in which croupy symptoms are induced by the inflammation of the larynx or upper part of the trachea, consequent on the irritation caused by the swallowing of vitriolic acid, or boiling water: and it is in such cases, before the inflammation has extended downwards, that bronchotomy is so serviceable, by affording the means of respiration, until the inflammation that obstructed the natural passage has subsided, or been subdued. Under such circumstances, relief is afforded by timely opening of the trachea, even though the foreign body, when such is the cause, be not removed, but this we may at least suppose capable of escaping or being removed from the opening several days after it has been made.

Whether such a result is to be looked for, or may be attempted to be brought about by instruments, when the foreign body is situated lower down in one of the bronchi, is a question of great importance, but of ulterior research, which I do not now venture to enter upon. It has already received attention from Dr. Brown, in an elaborate essay published by him in the *Edinburgh Medical and Surgical Journal*; and I doubt not will derive farther illustration from the pen of Dr. Houston, in the very curious and interesting case, contained in this number.

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ART. VI.—*Two Cases of Popliteal Aneurism*. By MAURICE COLLIS, A. M., one of the Surgeons to the Meath Hospital.

CASE I.—*Double Popliteal Aneurism, of fifteen years' standing. The right Aneurism becoming diffuse from injury. Ligature of both Femoral Arteries. Recovery.*

November 1, 1833. James Brady, æt. 38 years, a strong, healthy man; formerly an infantry soldier, and consequently

exposed at times to violent and fatiguing exercise. In the year 1818 (without having received any injury of which he was aware) he *felt a pain in both hams, and soon after perceived a tumour in each popliteal space*. These became somewhat larger when exposed to fatigue or cold; from the commencement a throbbing was felt in the tumours, but the patient was never prevented from attending to the duties of his occupation. These tumours continued stationary until August, 1833, when his right leg was much and severely bruised between two cows, (he was at this time employed as a cattle driver). The tumour, in this limb, shortly after increased and became painful; the throbbing augmented. The leg and thigh became swollen, and the foot numb and cold.

He came to the Meath Hospital in this state about six weeks ago, and as he refused to remain in the house at that time, I directed a cold evaporating lotion to be kept on for some time, and subsequently a moderately tight roller; under this plan the swelling diminished and the pain abated. He shortly after resumed his labours, and exercised his limbs considerably, and in consequence, the tumour began again to increase. His leg and foot became swollen and œdematous, and he complained of numbness, and a want of sensibility in the limb. The tumour in the ham became more diffused; and the pain, and an uneasy sense of constriction in the limb deprived him totally of rest. At this period there was no alteration in the aneurism of the left limb. In this state he was admitted into the hospital; the veins upon the surface of the limb were very distinct, and the saphena particularly prominent. There was a slight erysipelatous blush over the inside of the knee. Pulsation much diffused over the tumour. Pulse 90, rather hard; tongue clean; bowels regular. His general health was but little affected. There was not the slightest evidence of other disease in the remainder of the arterial system. He never suffered from palpitation of the heart, or difficulty of

breathing. He was placed in bed, kept quiet, allowed moderate diet; some purgatives, and an opiate at bed-time, and a cooling evaporating lotion to the swelling. The pain diminished, and the external inflammation subsided; but the tumour became daily more tense and extended: so that upon consultation it was determined to tie the right femoral artery, as the limb, as well as his life, became more and more endangered. I performed the operation on the morning of the 10th. The vessel was tied in the upper third of the thigh, with a single round ligature, consisting of three threads of three-corded silk. The patient did not lose a spoonful of blood in the operation. This case proceeded favourably, and the ligature separated upon the seventeenth day. From the period of its application the tumour gradually diminished, and the swelling of the leg entirely disappeared.

December 3. Able to walk about a little. The surface of the tumour is soft, and gives a slight sensation of fluctuation. It will, in all probability, suppurate before the patient gets quite well.

On the 14th, I tied the left femoral. In endeavouring to separate the artery from the vein, I made a small opening, about the size of a pin's point, into the artery, from which a rapid jet of blood took place. The artery was immediately compressed against the pubis, and a double ligature applied; one part of which was tied upon the highest exposed position of the vessel, and the other upon the lowest, leaving between both about a quarter of an inch of the artery. He did not lose more than about an ounce or two of blood. The tumour disappeared almost entirely after the application of the ligatures. The limb retained a moderate degree of temperature; every thing went on favourably, and on the 27th both ligatures came away. This man's health is daily improving. His appetite is good, bowels regular. He walks about every day, and is gaining strength. The tumour in the left ham has almost entirely disappeared; that in the right is daily becoming smaller.

This case presents many points of deep interest ; among these, the following seem to me to be the most remarkable :

1st. The great length of duration of the aneurismal tumours without their being productive of any unpleasant effects ; they existed almost stationary from the year 1818 to 1833. I am not aware of any similar case being upon record.

2d. Both tumours occurring simultaneously, a very unusual circumstance, and the more particularly so, that there does not appear to have been any general disease of the arterial system.

3d. The disease occurring in *both* situations without any sensible injury.

4th. The little inconvenience suffered by the man ; he was never prevented from attending to his duty, which at times must have been very laborious, until the period of his first application to the Meath Hospital.

In this case we had to consider many circumstances before undertaking the first operation. It was true, that the disease existed in more places than one ; but the conditions under which the patient had so long borne the disease were changed ; the right aneurism had become diffused from injury. The limb œdematous, and inflammation setting in. No alternative remained, but to tie the vessel, or allow the man to die of gangrene.

This operation having succeeded, I was encouraged to the performance of the other by the general healthy state of the arterial system, as shewn by the great length of time which elapsed from the first period of disease, by the patient's bearing the first operation so well, and from the importance of placing him out of the danger of an accident, such as had happened to the right aneurismal tumour.

CASE II.—*Popliteal Aneurism in a healthy subject. Operation. Copious hæmorrhage from the wound on the eighth and thirteenth days. Employment of pressure. Recovery.*

November 8, 1832. Michael Maddock, æt. 30 years ; a

labourer, generally very healthy ; resides in the country, about five miles from Dublin ; applied for relief this day. He has a large pulsating tumour in the left ham, which completely fills up the popliteal space, and which projects very much toward the outside. The swelling is hard, smooth, and elastic ; pulsation strong ; the *bruit de soufflet* very distinct ; a slight blush of redness over the most prominent part of the swelling. By compressing the femoral artery (the action of which is very great) all pulsation in the tumour ceases. He cannot bring his leg into a straight position. The leg is swollen and œdematous, and of a mottled colour. Complains of much pain in the ham, and numbness of the leg and foot. His pulse is about 100 ; no fever ; no indication of disease of the heart, or arterial system generally.

About five months ago he first felt pain in the ham, but did not perceive any swelling until three months subsequently. He continued at his work until three weeks since, when the tumour became suddenly larger, and very painful ; the limb became much more œdematous, and he was obliged to remain in bed. A few leeches and a cold evaporating lotion were applied with relief.

OPERATION.—12th. I tied the femoral artery in the upper third of the thigh, at the usual place. Nothing particular occurred during the operation, excepting a little delay arising from some difficulty which was experienced in passing the needle around the artery, in consequence of its peculiarly close adhesion to the vein and sheath. Upon the application of the ligature the pulsation in the tumour immediately ceased, and he was placed in bed, the wound being dressed as usual. In the evening he complained of shooting pain along the back of his leg and thigh ; did not sleep. No alteration in the size of the tumour, the apex of which is of a light purple or copper colour.

15th. Suffered much from pain in the foot and back of the leg. The muscles of the entire limb were occasionally thrown

into spasmodic action. A cold evaporating lotion was applied to the ham, which gave considerable relief. The leg and foot oedematous; the tumour feels more firm and contracted.

20th. Scarcely any alteration since the last report until this day. Upon dressing the wound, he complained that it felt much hotter than before, and a slight streak of blood was observable upon the dressings. About four o'clock, P. M. he experienced a sensation as if something gave way suddenly, and immediately afterwards he observed blood to gush from the sides of the wound. Before assistance could be obtained he lost, it was calculated, about twenty-four ounces of blood. Temporary pressure with lint and the hand was applied, and I was summoned to his assistance. I found the man's bed loaded with blood: I made an assistant compress the artery as it passes over the pubis; I then opened the wound through its entire length with my finger, removed all the coagula; I then applied a small firm compress to the bottom of the wound, which I filled up with pieces of sponge, and over these I applied a *presse artère*, with a graduated screw, which was kept very tight until the 22d, when it was loosened, but not removed. During this interval he was bled from the arm, purged, took digitalis, &c.

25th. Some degree of erysipelatous inflammation having been produced upon the upper part of the thigh, and anterior part of the abdomen, from the pressure caused by the instrument, it was removed.

27th. On this morning I took away all the sponges and lint, which were soaked in purulent matter, and came away without any difficulty. The wound looks healthy, and is granulating.

December 1. A small abscess formed on the upper and outer part of the thigh where the instrument pressed.

3d. About three o'clock this day (being thirteen days from the first attack of hemorrhage) a second took place; he lost only a few ounces of blood, as it was immediately arrested

by our intelligent apothecary, Mr. Parr, who instantly filled the wound with sponge, and applied the screw, which was left on until the 7th, when it and the sponges were removed. During this period the state of the patient seemed nearly hopeless. His countenance was almost hippocratic; he resembled a person in a low stage of typhus, and a gangrenous smell exhaled from the body. He was freely supported by wine, bark, and animal food. He had no further bleeding, and began to recover rapidly. On the 4th of January he was sent home, and soon after resumed his labours.

The instrument which I made use of was one previously employed by Mr. Crampton, the Surgeon General, in a similar case, and with good success. It consists of an iron hoop, about an inch and a half in breadth, and sufficiently large to encompass the thigh; it opens behind, so as to admit of such dilatation as to suit a limb of any dimensions. This hoop has a slit in the anterior and internal part, into which is placed a moveable screw, with a pad attached. This pad is to be applied immediately over the compress, which has been put upon the artery, and then by turning this screw, any degree of compression can be made upon the artery, whilst little or no pressure is made upon the other parts of the limb, and consequently no great obstruction, if any, is given to the collateral circulation. The hoop produced much inconvenience to this man, and was also the cause of inflammation, which terminated in abscess. This arose from the instrument being too narrow upon the part on which the limb rested, and I have now got one constructed with a broad flat surface; this is padded, and fits the under and outer part of the limb accurately, and on which the thigh rests without any inconvenience. To this are added two straps, one to surround the pelvis, and another the thigh, by which means the instrument is kept more firmly in its situation.\*

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\* This instrument was made by Reynolds, of the Coombe, who has shown much intelligence in constructing this and other instruments.

My chief object in recording this case is to show the advantage to be derived from pressure properly made, in arresting secondary hemorrhage, from such a vessel as the femoral artery, and the greater benefit likely to arise from such a mode of proceeding, than from tying the artery higher up, which, in the majority of the cases in which it has been tried, has failed in saving the life of the patient.

ART. VII.—*Researches on Solidification of the Lungs in New-born Infants.* By EDWARD JOERG, P. D., C. M. B. Leipsig.

THE greater number of new-born infants die of convulsions, apoplexy, or suffocative catarrh; so, at least, we are told by the parents, and even by the medical attendants, who are often unable to give us any clearer account of the matter, or unwilling to take the trouble of finding out a more accurate explanation of it. And yet the sudden death, or remarkable wasting away of so many children, should incite every observer to do his utmost to investigate the hidden causes of such melancholy occurrences. According to some experiments and observations made in the Leipsic School of Midwifery,\* the various conditions and accidents which so frequently endanger or destroy the life of new-born infants, depend on one and the same organic disease of the lungs, resulting from either too difficult, or too rapid and easy a delivery.

It appears that the infant, immediately after its expulsion from the uterus, has to make a strong and deep inspiration, in order at once to commence and to continue effectually the new vital process connected with the great change in the circulation which then takes place. Nor has nature neglected to make

\* Dissertatio inauguralis pro summis in medicina et chirurgia honoribus capessendis: "De morbo Pulmonum Organico, ex Respiratione Neonatorum Imperfecta orto;" auctore: Edvardo D. Joerg, AA. LL. M. Philos. Doctore, et Med. Baccal. Lipsiæ, 1832, sumtibus Barthii.