

ON A CASE OF ENCEPHALOCELE.

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In the thirty-ninth volume of the "Medico-Chirurgical Transactions" I have given the details of a case of encephalocele, together with a *résumé* of all that is known of this disease, derived from the consideration of upwards of eighty cases—all, I believe, that have been recorded up to the publication of this, the second case I have met with in my practice.

Mrs. W—, of Guildford, was delivered on the 3rd of April last, of a female child that was born with a tumour at the back of its head. During her pregnancy she noticed an unusual prominence of the abdomen. The labour-pains continued a week; but it was only for the last two days and nights that she was in strong labour. The waters were very copious. She had had three children by a previous marriage: one was still-born; one died from diarrhoea in its infancy; the third one, whom I saw, is a remarkably fine girl, eleven years of age. Mrs. W— herself is thirty-one years old, a good-looking, healthy young woman.

I first saw the child on the 19th of July. Depending from the back of the head was a large tumour, which was somewhat

pedunculated, and originated from the occipital, nuchal, and supero-intra-scapular regions. It measured from before backwards, above, eight inches; in its greatest transverse circumference, one foot, six inches; in its greatest longitudinal ditto, one foot, six inches. At birth it was about half these dimensions. The general form of the tumour was somewhat conical; it was lobed on its surface, more especially on the left side. The skin covering the tumour was not notably different in colour from the rest of the skin of the head, with the exception of some pale blue spots (venous dilatations.) The whole tumour fluctuated freely under the fingers, and the fluid-wave excited by succussion was felt transmitted equably in all directions throughout the mass. It was, moreover, translucent, like a thin-walled hydrocele; the flame of the candle lighting up every part of the tumour to a degree that indicated the absence of any considerable solid contents. At the same time the wall of the tumour was seen to have a reticulated structure, resembling a thin fasciculated urinary bladder.

One very remarkable feature was, that the base, particularly on the left side, was clothed with dark, silky hairs, which were upwards of an inch and a half long, several times longer than the hair on the child's head.

A general idea of the above appearances will be derived from a glance at the subjoined woodcut—a reduced copy of an oil painting of the case in my possession.



The child was thin and puny, but not otherwise deformed. The cranium was somewhat small at the frontal and vertical regions, but still tolerably well-formed; the forehead did not recede; the anterior fontanelle was of the usual size. The infant did not exhibit any signs of mental deficiency, but, on the contrary, smiled, and took notice of objects. The pupils were natural; vision perfect, but there was a convergent squint, especially of the right eye. The limbs, as I repeatedly observed, were neither paralysed nor contracted. For the last two months the child had been troubled with vomiting of its milk, and derangement of the bowels; and three days before I saw it, it had a fit, characterized by stiffness of the limbs and fixedness of the eyes. On August 17th I saw the child for the second time, and found it had gained flesh, but was still troubled with the disturbance of the digestive organs.

With the assistance of Mr. H. Taylor, of Guildford, I punctured the tumour at the apex below, and to the right, (where the skin was most tense, and no venous enlargements or hairs existed,) with a very fine trocar, and drew off gradually in the course of about ten minutes, exactly two quarts of a thin, limpid, straw-coloured fluid, which was alkaline in its reaction, and highly albuminous. Not a single drop of blood was lost in the operation, nor did the child evince the slightest sign of pain; on the contrary, it smiled, and took the breast whilst the fluid was being drawn off. At last, however, it cried a good deal, which was soon accounted for by its vomiting up a large quantity of tenacious, white fluid, (milk and mucus,) containing also some entangled air, which burst out in large bubbles from its mouth. After this it seemed relieved, and went to sleep.

On the completion of the operation, the tumour had collapsed

into a sac, which, as far as I ventured to examine its contents, was empty.

A week after the operation I found that no meningitic symptoms had manifested themselves, but that some fluid had re-collected, to the extent of about four ounces, in the sac; I now felt distinctly that a small *solid* tumour was present at the pedicle of the sac, in all probability, the cerebellum.

Devonshire-street, Portland-place, Aug. 1857.

HEALTH OF LONDON DURING THE WEEK ENDING SATURDAY, AUGUST 29th.—The deaths registered in London in the week that ended on Saturday (August 29th) were 1177; they exhibit an increase on the number of the previous week, which was 1091. In the ten years 1847–56 the average number of deaths in the weeks corresponding with the deaths of last week was 1345, which if it be raised for comparison with the deaths of last week in proportion to increase of population, will become 1480. But the average is swelled beyond ordinary limits by cholera in the epidemic years 1849 and 1854; and if this disturbing element be withdrawn from the calculation, it will be found that the rate of mortality in last week exceeds, but only to a small extent, the average rate at the end of August. The number of children born in the week exceeded the number of persons of all ages who died, by 479. The total mortality of last week exceeded that of the previous week, but the increase does not arise from diseases of the zymotic character taken in the aggregate, for though typhus was fatal in more cases, having risen from 41 to 66, scarlatina and diarrhoea showed a decrease, the numbers for the last three weeks being 244, 215, and 198; those referred to "cholera" in the same periods, 21, 12, and 15. Small-pox was fatal in 8 cases.