

ART. II. *Aneurism of the Arteria Innominata, involving the Subclavian and the Root of the Carotid, successfully treated by tying the Carotid Artery.* By VALENTINE MOTT, M. D. Professor of Surgery, New York.

NOTWITHSTANDING the tone of decided reprobation and ridicule with which ALLAN BURNS* expresses himself concerning BRASDOR's proposition to apply the ligature upon the anticardial side of certain aneurismal tumours, and the numerous arguments urged against the revival of his operation by some professional critics of considerable authority, experience seems to have shown that it is not only safe, but in some cases superior to the Hunterian mode of treatment. Some of the cases in which the operation on the anticardial side of the tumour has been lately performed in Europe, are said to have proved successful;† and I am gratified to have it in my power to add another instance of its success in perhaps the first case, that this operation has been performed in America.

Moses R. Gardner, ætat. 51, by profession a farmer, of sound constitution and good habits of life, applied to me some time in March for advice.

He gave the following relation of his case:—About three years ago, while occupied in removing a building, and compelled to lift heavy weights, he was attacked with pain in the upper and back part of the neck. This lasted until the month of January, when it extended to the right shoulder and arm, and continued until the following May; it then partially subsided, and he observed his voice was becoming hoarse, which he attributed to exposure and consequent cold. About eighteen months since, while shaving, he discovered a small swelling at the upper part of the breast bone, but did not remark any throbbing in it until some time afterwards. He had consulted a physician, but received no positive opinion on the case.

Upon examination, I found above the sternum a pulsating tumour, about the size of a pigeon's egg, spreading some distance under the clavicular and sternal portions of the right sterno-mastoides muscle, in the course of the subclavian artery, and extending as low down upon the pleura as the second rib, compressing more or less the bronchial tubes, and producing on the least coughing or exercise a wheez-

* Surgical Anatomy of the Head and Neck.

† See Wardrop on Aneurism. London, 8vo. 1828.

ing, not unlike that of asthma. He shrunk from the least pressure upon it; complaining of impeded respiration, followed by pain. Its pulsations were synchronous with those of the heart, and decidedly aneurismal.

After fully explaining to him the nature of his disease, and its probable fatal termination should it increase and be left to itself, I advised him to return home; to avoid all exertion; to be occasionally bled, and to confine himself principally to a vegetable diet; but should he observe the least increase either of the tumour or any of his symptoms, to come again to me, and I would decide on the propriety of an operation.

After that time I occasionally saw him; he seemed to understand his case fully, and was very desirous to take the chance of the operation; but as I could not observe any material change in the disease, I recommended him to pursue the same directions, and wait patiently until it should occur.

On the 12th of September he again came to the city. I found the tumour above the sternum had increased to the size of a large walnut, and upon a careful application of the stethoscope, it was evidently encroaching more upon the chest. The whizzing sound, (*bruit de soufflet*,) could be heard; the thoracic viscera were sound, the respiratory murmur being distinct throughout. His respiration was very much impeded by speaking, walking, or coughing, and almost entirely suspended by the least pressure upon the tumour; the action of the right carotid was much more feeble than that of the left; no pulsation could be discovered in its branches; the right subclavian, external to the scaleni muscles, was natural, while the axillary and brachial arteries could hardly be felt; at the wrist no pulse could be found; the pulsations of the arteries of the left side were natural. His general health was good.

In reflecting upon this case, and comparing the relative situation of the parts, I was persuaded the aneurism was of the arteria innominata, involving the subclavian and the root of the carotid; having formed this conclusion, I considered it a proper case for the operation proposed by Brasdor, and recently so ably revived, and first successfully performed by the distinguished WARDROP, whose scientific researches and masterly views of this subject, have since been so fully confirmed by himself and others.

I thought further delay unnecessary, and he being willing to abide by my judgment, after having stated to him the chances of the operation, I resolved on its performance. From the evident interrup-

tion in the circulation of the right arm, and the apparent effort of nature to effect a spontaneous cure, I determined upon tying the carotid first, to observe the result, and afterwards to secure the subclavian, should it be required.

On the 26th of September I operated. The artery was taken up in the usual manner; no material change was observed.

27th.—9 A. M. Slept well, and feels refreshed; thinks there is more room, as he expresses it, in breathing; complains of a little soreness of the tonsils in swallowing; pulse 58, regular, and tranquil; skin natural, pulsation and size of the tumour evidently diminished. 9 P. M. Much more restless from mental alarm; pulse 68, tense. In other respects, the same as in the morning; being habituated to laudanum, was permitted to take a tea-spoonful.

28th.—9 A. M. Slept well after the opiate; breathes easily, and says he takes "a more satisfactory breath," than he did before the operation; feels much less of the pulsation in the tumour; pulse 63, not so tense; skin natural; cough much less. Ordered a dose of calcined magnesia and Epsom salts. 9 P. M. Has passed a comfortable day; his wife, who arrived from the country since the morning, expressed her surprise at the improvement in his voice and breathing; and the difference in the beating of the tumour. Pulse of the right radial artery very distinct, but intermitting once from ten to fifteen beats; in the left arm 80; coughs frequently, and expectorates freely; skin natural; tongue a little white; salts have not operated. Ordered the dose to be repeated, and if restless, after its operation, to take his usual anodyne.

29th.—Saluted me this morning upon entering his room, with a full and fine voice, and said he was well enough to call on me; salts operated freely; thinks his cough and expectoration much less. I found him lying down, and breathing quietly; pulse 71, and regular. The radial artery of the right arm beating as last evening, with fewer intermissions, but of longer continuance; skin over the tumour more wrinkled; pulsation appears less, and feels weaker. Directed to continue his tea, toast, and gruel. 8 o'clock. As well as in the morning; takes a full breath without the least wheezing; pulsation in the right wrist very distinct and regular; in the left 62 to the minute. Continues the opiate.

30th.—Found him lying more recumbent than at any former period; pulse 70, and regular; right radial artery does not beat quite so firm as yesterday; wound discharging a little, was dressed.

October 2d.—Says he now feels as if he would get well; cough rather more troublesome; pulse 57; pulsation of the right radial the

same; his bowels not being free, directed sub. mur. hydr. grs. viij.—sup. tart. potassæ, pulv. jalapæ, aa ʒj. M. Evening. Medicine has not operated; directed a dose of sulphate of magnesia.

3d.—Cough and bronchial effusion very much diminished by the operation of the cathartic; pulse 68.

4th.—Feels very well; passed a good night; all his symptoms improved; pulse 74; can bear any degree of pressure upon the tumour without the least pain or difficulty of breathing.

10th.—Continues to mend, and is sanguine as to his recovery; pulsation of the tumour hardly perceptible, and to the touch very much diminished; cough less troublesome; left pulse 66; right, very feeble.

16th.—Ligature separated and came away last night; the tumour above the sternum, and pulsation entirely disappeared; cough and breathing better; voice nearly natural; pulse 66; now and then a very faint pulsation of the right radial artery; right hand a little swelled, and feels numb, and complains of the want of power to close it.

22d.—Wound just healed; weakness of the arm very considerable; fingers very thick and clumsy; arm swelled and pits upon pressure; no pulse in the right radial artery; breathing very easy; cough and expectoration much less; can sleep easy in any position, which he has not been able to do for many months.

26th.—Left town this morning for his residence in New Jersey.

New York, Dec. 8th, 1829, 25 Park Place.

ART. III. *Some Observations on the Plant that produces the Official Jalap, as established by its Culture during three successive Seasons.* By JOHN REDMAN COXE, M. D. Professor of Materia Medica and Pharmacy in the University of Pennsylvania. [With two plates.]

IT is not my intention to take up much time in the consideration of the subject which this paper is intended to embrace; viz. the real character of the plant that affords us the officinal jalap. It will be seen, by referring to the American Dispensatory, that although it has been one of the most prominent and approved articles of the *Materia Medica*, for upwards of two centuries, the absolute character of the plant producing it has been involved in obscurity. Desirous of bringing it fully to light, I attempted repeatedly to obtain the living