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PART I.
ORIGINAL COMMUNICATIONS.

I.

Case of Extirpation of the Eye. By Mr W. MUDD, Surgeon, Haddleigh.

THOMAS HALSEY, 58 years of age, in the month of April 1794, received a violent blow upon his left eye. The pain which it occasioned subsided in a short time; but vision, becoming gradually more and more indistinct, was entirely destroyed by the October following. In the month of April 1795, whilst at his work, his eye burst in the anterior part of it, and discharged a considerable quantity; this was preceded by considerable pain, but he did not recollect any perceptible enlargement of that organ. From that time he became easy, and continued well till November 1797, when the pain returned, and confined him from his labour eight weeks; during three of which, such was the torture he endured, he did not enjoy one hour's comfortable sleep. From this period, except slighter attacks, which now and then returned, and continued sometimes a week, sometimes less, he continued tolerably well until about Christmas 1803, when the

eye became inflamed, painful, and swelled; this, after a short time, considerably subsided, but did not entirely leave him. In the beginning of May 1804, the pain returned with greater severity, and the eye gradually increased in size, till the time of the operation, when it had acquired the size of a middle-sized lemon.

In the middle of September I first saw him; the eye-ball was very much enlarged, and protruded beyond the verge of the orbit; there was considerable hardness in the tumour; the vessels of the *tunica conjunctiva* were extremely turgid; and the patient complained of excessive pain. In a case like this, no advantage could be expected from external applications, or internal remedies. I therefore informed him, that extirpation was the only resource; but advised an opening to be made into the tumour first, as I thought I could perceive an obscure fluctuation. In the beginning of December, he put himself under my care; he informed me that poultices, fomentations, lotions of vitriolated zinc, &c. had been used with perseverance, but without any good effect; a puncture had also been made into the tumour, but with no better result, nothing being discharged but pure blood. The eye had evidently increased in size since I saw him in September; the vessels of the *tunica conjunctiva* had become more turgid; and that membrane, being very much thickened, presented a fungated appearance, covering the whole anterior part of the eye; the *palpebrae* were very much distended; the duplicature of the *tunica conjunctiva*, between the upper palpebra and the globe of the eye, was entirely inverted, and there was a small discharge of pus from the inner *canthus*. In consequence of the great pressure of the tumour upon the twig of the first branch of the fifth pair of nerves, which passes through the *foramen orbitarium superius*, the integuments of the forehead, and the parts which it supplies had become numb; pains frequently darted through the tumour in different directions; and he complained particularly of one, shooting to, and in the course of the coronal suture. The right eye had become much affected, there was a considerable cloudiness in the humours, and impatience of light; he was not able to distinguish letters, even with the assistance of spectacles; and an attempt to view an object elevated above a right angle with his body, was invariably succeeded by dizziness, which endangered his falling. For a considerable time, also, he had not been able to bear the admission of the air into the *meatus auditorius externus*, which constantly produced an uneasy twitching sensation, which compelled him to keep it covered. Pressure upon the nose gave considerable pain; and he said there

there had been a discharge from the nostril of the diseased side. His sufferance from pain was excessive, especially in the night, the greater part of which he generally passed without the least interval of ease, till the pain somewhat moderating, sleep afforded him a temporary oblivion of his sufferings. The inefficacy of the means which had so recently been applied for his relief, strongly confirmed my former opinion; and, to strengthen the patient's belief of the necessity of the operation, as well as for my own satisfaction in a high and indisputable authority, I recommended him to Dr Drake of Hadleigh. The operation was then determined upon, to which the patient readily consented, observing, that no temporary sufferance would shake the firmness of his resignation to whatever means afforded a prospect of mitigating his present sufferings.

December 19th 1804. Having prepared the necessary instruments, dressing, &c. the patient being properly seated, in the presence of Dr Drake, and the medical friends who kindly gave me their assistance, I proceeded to the operation. To avail ourselves of the advantage of reducing the size of the tumour, by evacuating some fluid which might possibly be contained, I began by making a puncture in the most depending part, but nothing followed but a slight effusion of blood from the divided vessels; a broad ligature was next passed through the centre of the tumour, to assist in drawing the parts forward. I then proceeded to dissect out the diseased parts with a small scalpel. Having divided the *tunica conjunctiva*, connected with the upper palpebra, the diameter of the tumour was found to exceed that of the orbit so much, that its bony edge could not be felt. The subsequent part of the operation became extremely difficult and tedious. Every particle of fat had been absorbed; the muscles, coats, and humours of the eye, were one confused mass of disease, connected extensively by morbid adhesions to the periosteum; in short, the whole orbit was literally crammed with a confused mass of disease. Under such unfavourable circumstances, the only object was to remove the diseased parts, without injuring the bones, and to leave a thin covering for them in those places where the periosteum was implicated in the disease. This, from the firmness of the tumour, and its strong connexion with the periosteum, was a task of the greatest difficulty. Upon inspecting the orbit, when the tumour was removed, a small portion was found to adhere to the periosteum at the bottom, of this as much as possible was removed; the hemorrhage, which had not been great, was suppressed by the application of thin pieces of sponge, with which the orbit was filled; soft lint was applied

to the eye-lids, and the whole covered with a plaster of emollient ointment. The patient then took thirty drops of laudanum in a draught of water, and went to bed. The poor man supported the operation, which was long and painful, with the greatest fortitude, and without the least tendency to syncope. Upon examining the tumour, not a vestige of the organization of the eye remained; it was a confused mass, considerably vascular, of a livid colour, and in consistence resembling, but more spongy than that of liver.

I saw him in the evening,—complained of chilliness after the operation; pain not severe; pulse 70, rather full; slight tumefaction beginning to appear on the eye-lids, and parts surrounding the orbit; considerable oozing of blood. He took the following pills:

℞ Opii purificati gr. ij.
Calomel pp. et
Pulv. jalapæ ana gr. v.

Cum syrupo fiant pilulæ ij hora somni sumendæ.

20. Had as comfortable a night as could be expected, having slept several hours; pain moderate; pulse full and somewhat irregular; slight heat and thirst; tumefaction increasing; the oozing of blood had diminished and become serous. Took at bed-time a draught, containing thirty-six drops of laudanum.

21. Had a tolerable night; says the pain bears no comparison with what he had felt for many months before the operation; pulse under 70, and not so full as yesterday; the swelling had extended to the eyelids of the right side, and it now occupied part of the forehead; the left cheek, and temple; suppuration had begun in the eyelids; as he had had no motion, he took the following pills:

℞ Calomel pp. gr. v.
Pulv. jalapæ gr. xv.

Syrupi q. s. Fiant pilulæ iv, quarum sumantur ij statim, et repetantur, si sex horis elapsis, non subducatur alvus.

The sanguineous discharge from the orbit had nearly ceased, and the parts were fomented with a decoction of poppy-heads.

22. The pills had produced one motion; says he had enjoyed a more comfortable night than he had during the last seven months; pulse 60 and regular; tongue somewhat furred; swelling of the eyelids of the right side had considerably subsided; pain trifling; lips and gums swelled, but not painful; suppuration beginning within the orbit. Took at bed-time the opiate with the purgative.

23. Had passed a good night, free from pain and fever; swelling subsiding; had had two evacuations by stool; considerable factor in the discharge; repeated the opiate at bed-time.

24. Comfortable night, free from pain and fever; swelling greatly subsided; repeated the opiate at bed-time.

25. A fit of coughing had brought on a slight discharge of blood; pulse somewhat increased in frequency and intermitting; in other respects much as yesterday; the dressings came away easily; I filled the orbit with dry lint, and applied a plaster of mild cerate; omitted the opiate, and took the bark three or four times in the day.

26. Swelling rapidly abating, which now occupied only the eyelids; the fœtor had greatly diminished; removed the dressings, and lightly touched some parts with the lunar caustic, which produced no pain; his pulse had increased to 84; as he had had diarrhœa, he took at bed-time two grains of opium.

27. Pulse had fallen to 70, and regular; dressed as before; swelling nearly vanished; repeated the opiate at night.

28. Night comfortable; pulse as yesterday; free from pain and fever; swelling entirely subsided; dressed in the same manner, and repeated the opiate.

29. Much as yesterday; continues the bark, and takes common diet, with a proper share of animal food and fermented liquor; repeated the opiate at night.

30. Had a good night; the fœtor of the discharge gone off; the orbit clean, from every part of which granulations, apparently healthy, are shooting up; dressed with dry lint, and a powder of equal parts of bark and nitre.

31. Sat up yesterday and took a hearty dinner; free from pain; and enjoys comfortable nights without the opiate.

1805. January 1. Strength and appetite rapidly returning; granulations rather spongy, but secrete an apparently healthy pus, although there is now and then a discharge of an offensive sanies. The strength and sight of the right eye greatly amended, the humours of which have from day to day become clearer; and he can now, with the assistance of common spectacles, read in a small print. He enjoys a great flow of spirits, and laments that the operation was not done before.

Henceforth no particular circumstances occurred; the wound was dressed daily with different applications, which, by their astringency, might tend to strengthen the granulations, such as powder of bark, myrrh, rhubarb, &c. successively changed, according to circumstances. Although an apparently healthy pus was generally secreted, yet a few drops of an offensive sanious fluid would sometimes distil from the parts; and, notwithstanding the constant use of applications to resist their luxuriance, the granulations were in places large and spongy. They ultimately filled the orbit; and the skin from the superior palpebra, the tarsus

of which had sloughed away, extending over the newly formed parts, united with the inferior palpebra. Thus was the wound completely healed, and the poor man, who constantly evinced the most lively sensations of gratitude, was again enabled to employ himself in the various branches of husbandry.

For some time things remained in a quiescent and flattering state, but it was not long before symptoms of morbid action manifested themselves; for a gradual enlargement of the parts took place, which was accompanied now and then, (as he described it) with that sensation which a part recently healed experiences from the effects of cold. On the 30th of June, I was desired to visit him; I found the parts about the orbit affected with considerable inflammation, attended with *pyrexia* and other febrile symptoms. These, together with the inflammation, disappeared in a few days, and he was again enabled to return to his labour. I saw him a few weeks after, and he informed me, that he had experienced a pain within the orbit, which returned every evening, lasting generally an hour or two, after which it abated, and he enjoyed undisturbed sleep during the rest of the night. The swelling of the parts had also increased, and the veins of the superior palpebra had become varicose. From this period the pain increased by degrees, but was, in its greatest severity, so tolerable, that it did not prevent him from working, until Saturday the 30th of November. I saw him on Monday the 2d of December, he informed me that he was then much easier, but that he had suffered much during Saturday and Sunday. There was a great swelling protruding from the orbit, in which there was an evident fluctuation; coma, apoplectic stertor, and other symptoms of pressure on the brain supervened. The tumour was opened, from which was discharged, a quantity of a black grumous matter. He continued in a state of stupor till the night of Wednesday, December 4th, when he expired, having, with the exception of a few days, lived a year from the time of the operation; and having, excepting also one week in the month of June, applied himself uninterruptedly to various branches of agricultural labour, within five days of his dissolution. I obtained permission, and intended to examine the state of the brain, for which purpose Dr Drake did me the favour to accompany me; but the head, face, and neck were so swollen, so surcharged with blood, and putrefaction had so far advanced, that there was no probability of a profitable investigation. I therefore only examined the state of the orbit. Upon removing the integuments, the orbit was partly filled with a black, grumous, offensive fluid, which being cleared away, I removed all the contents so as to expose the state of the bones. In the orbitar process of the *os frontis* was a hole, large enough

enough to admit the point of the little finger, through which the fluid from the orbit had escaped and pressed upon the brain. Occupying part of the orbital processes of the *os sphenoides* and *os mala*, and a small portion of that of the *os frontis*, was another hole, nearly as big as a shilling, through which were seen fibres of the temporal muscle. The *os planum* was perforated in several places, and in many the bones were so thin and tender, as to give way to the slightest touch. The anterior and inferior part of the orbit, formed by the orbital process of the *os maxillare*, was separated from the *antrum Highmoreianum* only by the membrane which lines the latter; and a probe being passed into that cavity, a quantity of foetid gas escaped.

A morbid state of the bones had doubtless obtained previous to the operation, for the occasional discharge of a foetid sanies from the wound, the loose and spongy state of the granulations in some parts of the orbit, the long duration of the disease, and the extent to which caries was found to have taken place, upon examination after death, all concur in favour of that opinion. From a retrospect of this case, it evidently appears, that, had the operation been performed before the disease had arrived to so deplorable an extent, whilst the morbid parts remained unconnected with the periosteum, there would have been every prospect of complete success. Even in this case, the circumstances of which rendered it so truly hopeless, and which, could they have been foreseen, might have deterred us from the operation, resulted the most speedy and signal relief; and if the operation did not prolong the patient's life (which there is every reason to suppose it did), it afforded so happy an alleviation of his sufferings, that he was amply rewarded for the temporary sufferance from the operation, by the comparative comfort and pleasure which sweetened the remnant of his existence. The result of this case places in the most luminous view, and enforces, in the most cogent and pointed terms, the necessity of an early performance of the operation in cases of this kind. Where there is a great and unusual enlargement of the eye, accompanied with a progressive deterioration of symptoms threatening *carcinoma*, or other dangerous disease of that organ, if there be reason to suspect a deposition of pus, or other fluid, a puncture may be made into it with safety and propriety. In such a case, its evacuation would, in all probability, give immediate relief. If, on the contrary, no fluid follows, upon a sufficient opening being made, and the humours be found to have a denser consistence than natural, the enlargement may be considered to proceed from the extension and multiplication of morbid vessels, and the necessity of extirpation becomes sufficiently obvious.

This has been considered as an operation highly dangerous; and, from the proximity of the diseased organ to the brain, and its immediate connexion therewith, by the optic nerve, &c. we might, with apparent reason, infer a great probability of danger; but the result of those cases on record, which have occurred to my notice, seems to justify a different conclusion. The subject of that case recorded by Martin Bogdanus, in which the method of extirpation involved less determinate injury to the optic nerve, and other connecting parts, than the modern method of excision, recovered without inconvenience. “*Ægro apte collocato, lithotomum filum per oculum læsum jussi traducere, confestim separato oculo ab adnata in utroque angulo, cultello Fabricii nostri cent. 1. obs. 1. arrepto orbitam profunde circinaret, et oculum extemplo cohleari, ad id confirmato eradicaret.*” *Observat. Medicæ ad Bartholinum, vide Michaelis Lyseri Cult. Anatom. p. 210.* In the greater number of cases the operation was attended with success; in none has it failed to give manifest relief; and in this, the history and circumstances of which I have now related, the progress of a merciless disease was arrested, and a source of pain and irritation cut off, under the extending ravages of which the patient would have lingered, a most afflicted sufferer, till death had closed his miserable existence.

Hadleigh, Suffolk, 14th Aug. 1806.

II.

Cases of Preternatural Pulsation in the Abdomen. By J. A. ALBERS,
Physician in Bremen.

A GIRL, twenty-four years of age, who had almost always enjoyed good health, one evening, while looking out at the window, fell back senseless on the floor. That morning her menses had appeared, and they continued to flow naturally during the whole period of her disease. As soon as she came to herself, she felt a desire to go to stool, and discharged a black pitchy matter, and again fainted. These symptoms continued during the whole night; and next morning, when I was called, I found her much debilitated, with her cheeks and lips pale, and scarcely able to whisper an answer to my questions. Her respiration was laborious; pulse considerably small and quick, but somewhat hard;