

Instrument for the performance of transfusion.

Contributors

Handyside, P. D. 1808-1881.
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INSTRUMENT FOR THE PERFORMANCE OF
*Extract from Proceedings of Maine-Chirological Society
 Medical Journal for March 1865.*

Dr. Embley exhibited an instrument calculated for
 the purpose of transfusion. He had performed the operation
 happily in two cases successfully. In the two former
 using the ordinary apparatus, he had experienced some
 difficulty in taking the blood to be injected from coagulating;
 being required in taking the blood into the syringe
 into the vein. No doubt, when there were plenty of an
 could be got over, but where there were not enough
 easy to introduce the tube and retain it within the vein
 on two occasions that the edge of the vein was apt
 to tear, but he had used a lancet in the form of
 a semicircle rounded at the point and grooved. With this
 instrument was introduced for about a quarter of an inch into the
 right the needle of the syringe was passed along the
 the instrument was then withdrawn. He had found that
 operation very materially. He had employed it last
 a patient of Dr. Alexander Wood and Professor Simpson,
 been going on from two till six o'clock. Transfusion of
 blood was injected to restore the action of the heart. It
 only the pulse had been imperceptible, and the heart's action
 Embley believed, that while ordinary means were sufficient
 plenty of assistance, the instrument shown would be for
 operation had in depend exclusively upon himself.



INSTRUMENT FOR THE PERFORMANCE OF TRANSFUSION.

Extracted from Proceedings of Medico-Chirurgical Society, reported in Edinburgh Medical Journal for March 1865.

Dr Handyside exhibited an instrument calculated to facilitate the performance of transfusion. He had performed the operation three times, and happily in two cases successfully. In the two former of these cases, while using the ordinary apparatus, he had experienced some difficulty in preventing the blood to be injected from coagulating; the greatest celerity being required in taking the blood into the syringe and transfusing it into the vein. No doubt, when there were plenty of assistants, the difficulty could be got over, but where there were not enough it was by no means easy to introduce the tube and retain it within the vein. He had found on two occasions that the edge of the vein was apt to become inverted. Accordingly, last time he had used a lancet in the form of a cutting director, somewhat rounded at the point and grooved. With the left hand this instrument was introduced for about a quarter of an inch into the vein, and with the right the nozzle of the syringe was passed along the groove into the vein; the instrument was then withdrawn. He had found that this facilitated the operation very materially. He had employed it last Sunday in the case of a patient of Dr Alexander Wood and Professor Simpson, where bleeding had been going on from two till six o'clock. Transfusion was performed at eight o'clock; the instrument and nozzle were introduced very readily, and sufficient blood was injected to restore the action of the heart. For some hours previously the pulse had been imperceptible, and the heart's sounds inaudible. Dr Handyside believed, that while ordinary means were sufficient when there was plenty of assistance, the instrument shown would be found useful when the operator had to depend exclusively upon himself.



