

Minutes of a formidable aneurismal state of the leg, (where amputation had been proposed as the only means to save life), cured by the treatment of compression / by Samuel Young.

Contributors

Young, Samuel.
Royal College of Surgeons of England

Publication/Creation

Plymouth : R. White Stevens, printer, 1841.

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MINUTES

OF A

FORMIDABLE ANEURISMAL STATE

OF

THE LEG,

(Amputation had been proposed as the only means to save life)

CURED BY THE

TREATMENT OF COMPRESSION,

BY

SAMUEL YOUNG,

Consulting Surgeon, of the London Royal College of Surgeons;
Surgical Society; Founder of the Science of Compression
of practice; late Surgeon to the London Cancer and Compres-
sions, and now Surgeon to the Phoenix-Street, Stonehouse Institu-
tional Diseases of the Joints, Tumours, &c.; and the cure of Sore Legs
and Amputation.

*whether in or out of fashion, is the measure of knowledge and
business of the understanding. Whatsoever is beside that,
never authorised by consent, or recommended by rarity, is nothing
ignorance, or something worse."*—LOCKE.

PLYMOUTH :

R. WHITE STEVENS, PRINTER, PARADE.

1841.

MINUTES

OF

MIDLAND ANNUAL STATE
CONFERENCE

OF

THE 1888

The first of the series of conferences was held at the
Hotel de Ville, Paris, on the 1st of July, 1888.
The conference was attended by a large number of
representatives of the various churches and
societies of the world, and was held in the
presence of the President of the French Republic.

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ADVERTISEMENT.

gh the practice by compression was fully and fairly made known by
shed minutes of authenticated cases successfully treated, as far
1815, (now twenty six years ago), and to which minutes the
address to the governors of the Middlesex Hospital was affixed by the
Whitbread, as having himself been an eye-witness to the facts therein
:—One who was always found in the front rank at the call of
, and ever working, aided as he was by his great influence, his
grity, and comprehensiveness of mind, for the good of mankind.
ough a second edition of these minutes as well as the published
y Mr. Whitbread, were followed by the publication in 1818, of
minutes of cases successfully treated by compression; and these
lectures delivered by the author, at the Cancer Institution, in
treet, Soho, and practically illustrated by cases on the spot, and
tures were attended by several eminent practitioners; and among
the late Dr. Armstrong; and though the practice was taught to
titioners in various parts of the country as well as London. Among
re Mr. Oldknow of Nottingham, and Mr. Trowbridge, of Cerne, in
re. The former gentleman as Surgeon to the Nottingham Infirmary,
ccessfully adopted the practice and cured in 1821 and 1822, two
affections of the breast, and one of white swelling of the knee;
having been admitted into the infirmary, as patients for knife-

ases also successfully treated by Mr. Trowbridge, were published in
well as his letter to Mr. Robert Gordon, the present member for
and whose mother the author had so successfully attended for a
hich Mr. Cline with other London Hospital Surgeons in consultation,
d so fatal as not to admit of the possibility of the lady living
ree months; but who, on the contrary, by the aid of compression
g well and hearty, and enjoying the fullest state of health and
ore than three years after this supposed *three months* termination
ation, as Mr. Robert Gordon can now testify. And with all this, as
her cases from time to time published in the 'Medical Journal' up
23; besides the practice being adopted and practised throughout
ment, as was remarked by Dr. Parkin, of the Woolwich barracks,
eman when in conversation on the subject. Yet, with all this, the
f compression, as a system of practice, is but little known to very
d if even so known, still less understood.

this, compression, as a newly discovered system of practice, has
more to complain, than other important discoveries and innovations,
her have existed about its own establishment, or, have long pre-

ceded it. Every benefaction, in every age and clime, have all enjoyed the patronage of persecution and abuse. It is so ordained by Established Ignorance—it is impossible any *improvement* can escape a common fate.

Even vaccination itself, now established some half century, as reported as it has been by the profession, and most highly does that so long, so liberally, and so disinterestedly given, redound to the credit of that profession,—even vaccination itself, even now, requires the aid of relative interference and support to save it (at least in this country though the land of its birth), from falling to the ground, and becoming almost a dead letter.

No wonder then that the science of compression has received its due and its stand-stills. But the most serious impediment to the due and prompt advance of the practice was, the breaking down of the author's health, occasioned by the anxiety and fatigue he endured in its promulgation.

At length, however, he returns with renovated strength to his work, and among several highly interesting and important cases yet unpublished, selects the one now given from the circumstance of its *local* interest, having attracted, as it has done, so much professional attention as to merit general sympathy.

Had the author been ignorant of the practice by compression, he would entirely have concurred in the opinion of the necessity of the operation, as it was proposed.

The minutes of this case, therefore, are here given, not in a distant view, as any slur on such a proposal; quite the contrary. It is given simply that so important a practice as compression is, may be better known, and far better and more extensively adopted.

And with this view the author faithfully inscribes these minutes to the enlightened practitioners of Plymouth, Stonehouse, and Devonport, and the surrounding neighbourhood. And more especially with still greater regard to the profession at large. For,

“Wide as inspiring Phœbus darts his ray,”
Diffusive science, spreads its light—like day.

March 1, 1841.

The Council of the London Royal
College of Surgeons —
from the author —

July 26 - 1843 —

Carlstock, Cornwall

CASE OF REBECCA THOMAS, DAUGHTER
OF THE LATE BRANCH PILOT, THOMAS.
RESIDING IN WHITE LANE, SOUTHSIDE-
TREET, PLYMOUTH.

MBER 18, 1839. Applied for a curious vascular affection
left leg, where, from an aneurismal spot, a pendulous body
at the bottom, at the outer part of the limb, some three
below the knee. The patient is full habited, and of a
anguineous nature; age, 30 years.

It noticed the disease ten years since, in consequence of
ng a slight blow on the part: from the immediate pain
ed was then first led to examine the part, and there
a dark purplish crimson spot about the size of the top
oman's thimble. The spot at first was flat to the surface,
s covering like a very thin vellum, but which soon rose
the height of half an inch, hot—blood hot and pulpy to
l. On this occasion, after the pain, which continued for
en minutes or more, went off, the tumour which had so
eturned to the level of the skin. For six years it remained
t any apparent growth or pain, except at the latter part
time it remained much longer above the surface than in
st mentioned instance, when accidentally receiving even
ghtest touch. On these occasions it would rise hot and
attended with extreme pain all down the leg, especially
to the inner angle, as well as in the part itself.

the Thursday before Christmas day three years, (1836)
stooping to draw off a person's boot, felt something very
trickling down the leg, and on looking, perceived a gore
od on the ground and the clothes drenched so that the
could be wrung out of them. The part was bandaged
n flour and the patient went to bed, when the bleeding
; next day applied to a Medical man, when she cannot

describe the appearance and state the part was in—it was full two inches above the surface, and more than an inch a quarter in diameter at the top.

In the course of three or four days the tumour which had rose up, and was of a dark mortified colour, subsided; from the bottom of which was appended the present pendulous substance, and which is now fully the size of a large irregular shaped dry fig, but much thicker in parts, and largely supplied with blood vessels. At the time, however, of the subsidence of the tumour, this appendix was only the size of the first joint of a moderate forefinger; the very dark colour of the tumour then subsided.

The fig-like appendage grew rapidly the first twelve months to nearly its present size; even in a fortnight after the subsidence of the tumour as here described, upon the appendage being roughly handled at a surgical examination, a Physician and Surgeon being present, the blood was thrown upwards with great force on and over the patient's shoulder, and continued bleeding largely from the lower edge till bound up with plaster straps and lint compress.

Next day when the applications were removed by the Medical attendants, on being again handled, the fig-like appendage only swelled up, but the aneurismal skin spot also rose three inches above the surface in a bursting and apparently mortified state. The patient describes the feeling at the time as if the whole were forcibly being dragged out by the action of pincers.

At the same moment from the under and lower edge of the appendage, (which the patient herself calls *the tongue*) an immense hæmorrhage commenced, filling a large wash basin half full. The bleeding was of that character and to that amount, as to induce the Physician who was present to exclaim, "By — the woman will bleed to death." The patient rendered so weak in consequence, that an hour after it was bound up she was unable to walk without assistance.

About this time it was that one of the many Surgeons who attended upon the case proposed removing the parts by the use of a knife, describing a large area on the leg around and considerably beyond the disease with his finger; this was objected to as evidently most wisely, by the two professional gentlemen alluded to; they preferred the removal of the limb at once rather than hazard so uncertain an operation, and urg

tion at once,—the fear being at the time that the patient might sink if a second bleeding took place during the night. Several long established practitioners also, in after consultations, decided in the necessity of the removal of the limb for the ultimate object of saving the patient's life.

For a month after this profuse bleeding, upon every removal of the applications, it bled slightly from the under edge of the aneurismal spot; but in a few days after the great hæmorrhage, the aneurismal spot itself, again subsided to the level of the skin. Some twenty months since, after kneeling, the knee and leg became red and turned black in spots as if pinched. The following day some active bleeding came on, wetting through the bandage and roller, but nothing to be compared to the former bleeding,—since which no bleeding of any consequence has occurred; but the leg gradually increased to its present state, covered all over with purplish cutaneous veins with immense enlargement, and particularly about the outer as well as the inner margin, and spreading to the foot, which it so involved, as to leave but little trace of natural shape.

The history of this case so far is taken from the patient's own description of mouth description. The appearance of the limb has a very diseased character, and especially about the calf a peculiarly strange *quagmire* feel to the touch. Throughout, professional attention has greatly been excited by the case, and the proposal for the removal of the limb not lost sight of.

In every way of remark, it may be observed that the disease in question is in its nature somewhat anomalous; though decidedly not that description which John Bell was the first so accurately to describe under the head of 'Aneurism, by Anastomosis.' In some respects it has the feature of *Fungus Hematodes*, but differing whatever, in the most distant degree, of the *mere* varicose

so enlarged and distorted a state of the limb, relative position of parts is in a great measure disturbed, if not wholly lost; but still the situation of the aneurismal spot, one would expect to find just within the inner edge of the Peronæus muscle, and just over the outer edge of the Tibia; that is just over and about the junction of the artery and vein—a most suspicious circumstance, for, the *erectile* nature of the aneurismal substance as proved by the history of the case, there can be no doubt but what a vascular and spongy tissue of considerable extent forms its basement. In such a neighbourhood to what

extent, and how formidably supplied by blood vessels is question. Great uncertainty and risk would therefore necessarily attend the dissecting out, or rather *the attempt* to dissect such a disease; and the Surgeon as well as the patient and others, must be all prepared for the possible, if not probable immediate amputation of the limb to save life in case of failure.

MINUTES OF THE TREATMENT.

DECEMBER 19th. The fig-like appendage was left as a guide to show how far the vascularity of the aneurismal spot and basement was affected under pressure: otherwise, had it been deemed prudent, a ligature might have been applied to the pendulous neck.

The general restoration of the limb to health was, however, the first object; for this purpose the foot, heel, ankle, and leg were accurately rolled, at least as well as the great irregularities and enlargements of the parts admitted: active purgatives and the Hydrarg Submurias in alterative doses were prescribed.

Dec. 20th to 25th.—Rolling has been followed up; at times interrupted by occasional swellings of the foot, &c. at night. However, gradual increase of pressure has still been persevered in, and the limb to-day (Xmas) presents a remarkably improved state both as to size as well as the diseased and discoloured appearance of the skin and its veins. The pain she used to suffer has almost subsided, especially from the aneurismal spot down to the inner ankle, where the enlargement was deepest and discoloured; all this is now nearly removed, and the enormous bulk outwardly above and over the ankle and foot is strikingly reduced. Very active pressure employed; the purgative plan continued; health improved.

After the second application of compression, the aneurismal spot and appendix were placed under the pressure of plaister straps; to these, additions have been made, and over the whole a firm, graduated linen compress has been included in the application of the rollers.

1840. Jan. 3d.—Very active pressure has been kept up from time to time since the last minute; not the slightest pain or swelling have occurred. To-day, upon the removal of all

s, the limb appeared considerably smaller than the other above the ankle, where it was so enormously enlarged, a much less by measurement than the other leg. The integument loose and flaccid.

Specific pressure employed over the aneurismal spot and the appendix by graduated paper compress and plaister straps; the former strap applications not being removed, and the whole limb placed under very active pressure; but more especially over the immediate disease by the further employment of a new compress and the firmest rolling, the pressure being gradually carried up to the uttermost drawing the hand and arm into use, assisted also by the knee. In this process of the treatment pins were used as fixed points to confine the specific pressure to the part, and prevent ligature on the limb.

a. 12th. None of the plaister straps have been removed, at the immediate state either of the aneurismal spot or appendix has not been ascertained. Not the slightest pain or inconvenience of the part has been experienced; but evidently diminished circulation to a great extent has been effected, the different sensation felt by the patient herself, as well as the total disappearance of large vessels quite below the treatment, which formerly were seen passing along the upper outer part of the leg to the thigh, some inch above the aneurismal spot, but not at all by any trace in connexion with them. They had a peculiarly flat, smooth, and somewhat transparent appearance, gliding deeply under the skin in almost straight lines. Not a vestige of these vessels is now to be seen: there were three in number,—one in particular, an apparently straight channel; in length and in breadth about the inner edge of a moderate sized forefinger. All the active treatment continued.

a. 19th. To-day, on attempting to remove the plaister straps, the fig-like process was unfortunately dragged, which produced considerable irritation to the aneurismal spot, and which, in a perfectly quiescent and reduced state, rose frightfully at the instant, giving a dreadful sensation of tearing and swelling of the whole limb.

In this circumstance, which gives a tolerable reproof to those who would in their simplicity treat such a case as *a nothing*, I added any thing like further inspection, and the parts were immediately placed under the control of the compression: this was cautiously and gradually increased over the aneurism

to a maximum height, and in the course of less than a minute all the dreadful sensation and pain subsided.

Feb. 23d. So much amendment in the case, that re-applications are now only made once a week. The plaister straps over the process have not been touched the last three weeks, but evident absorption, from the *hollowness* of the part, would appear to be going on. Not the slightest inconvenience experienced in the limb, and the cuticular veins have altogether disappeared; and the patient observed, "that it was a long time since she enjoyed such health as she now feels." Most agreeable pressure kept up.

March 1st. Walked into town five miles to have the applications made; and more than a fortnight since, (on the Queen's marriage) the patient walked ten without the slightest inconvenience. Before the treatment, could not walk half a mile without being ready to drop from pain.

Upon the removal of the pressure immediately over the aneurism, has now none of that filling, bursting sensation which formerly always attended upon every such removal; the sensation has now entirely subsided the last three weeks. Agreeable pressure continued.

April 12th. To-day all the straps were removed; and particularly the two between which the neck, as well as part of the process were included; part of the surface had been slightly abraded, and from which a small discharge had issued, stain the rollers immediately in contact.

On removal of the two straps from above and below the neck of the process, the two blood-vessels passing through it in the body of the process soon began to fill and swell up the part, which before appeared quite flattened, thin, and apparently bloodless; the small abraded surface became covered with minute scarlet points, and blood, quite of an arterial character, soon began to drop freely and fast from it, but attended with any jet. During all this, the aneurismal sac itself remained flat—indeed concave in its surface. Before re-application of the compression which was immediately made over the part, some two ounces of blood fell upon the carpet and which was taken up in the fire-shovel, for it almost immediately coagulated: after the application of the compress there was no stain of blood after the first coil or two of the roller.

May 10th. The fig-like process, from the discharge of the foetus, would appear to be in a sloughing state; but all

tions immediately in contact were not removed, from their state, and also, in consequence of the removal of a me oozing of blood took place; the remainder therefore, as there was no object for their removal, but on the y, such would only encourage a return of circulation in the part by the absence of pressure.

23d. The discharge on Saturday last, (17th) was ely foetid, and the compresses in consequence over the mal spot were all removed; and in part also over the process.

lay, the compresses had slipped down, leaving the mal spot free from all pressure; but no filling of the formerly was at all perceptible; and on the removal the compresses, the once fig-like process (or tongue) had caused so much anxiety to the patient for years, on t of its frightful swellings and bleedings, was now found the black, foetid discharge quite disengaged, a mere utrid mass, about the thickness of half-a-crown, a small of the elongated neck only remaining at the bottom aneurismal spot. The limb was placed under general ssion.

30th. The applications had slipped down to-day so as a ligature across the aneurismal spot, but no swelling ng of the under part took place, though the covering a dark purplish colour, evidently in consequence of the e produced.

he re-applications being made, more specific compresses essure were placed immediately over the aneurismal spot edicle. The limb had remained perfectly easy and com- e during the week; though the last few days the patient offered from an old spasmodic stomach complaint, for remedies were prescribed.

e 4th. All the applications removed, and still more pressure used in the re-applications. The stomach attack e last few days.

e 12th. The whole of the applications removed, and the ing pedicle, or neck appeared in a sloughing state, giving e same putrid discharge as the fig-like process did when ate of slough; affording an instance of the powers pression even over minute portions of diseased bodies. en this case first came under the notice of the treatment pression, a retired Surgeon, who had never seen the

case before, strongly urged the placing of a ligature round neck of the pendulous tumour; and perfectly ridiculed the idea that it ever could be sloughed by pressure alone. To my observation in objection to placing the ligature, viz, "that the fig-like process or pendulous tumour in itself I considered mere nothing—that it was the *inward* disease from which it was supplied that was the main object in view; and therefore wished the tumour to be left as a gage to mark the effect produced on the *deeper seated* disease; and which, if the compression produced the effect for which it would be employed, viz:—the ultimate obliteration of the vessels supplying the deeper seated cellular, or aneurismal mass, on which the tumour alone depended for supply, that it would then necessarily slough off as a natural consequence."

To these remarks, the Surgeon exclaimed, "Never. compression you can use will make this (taking hold of the tumour) slough away without ligature!!"

So much for positive opinion without experience; and so much for the result now seen, and which was fully anticipated.

Active compression over the aneurismal spot and pedicle resumed; and which is effected, including the whole of the leg and foot, by three 5-yard rollers: formerly, 33 yards were obliged to be used. The patient's general health much improved.

June 21st. The patient reports to-day, "that the Surgeon who had proposed the dissecting out of the disease had been met by her aunt; and when informed of the present state of the limb, and the sloughing of the tumour, expressed surprise as well as satisfaction."

Active compression continued. The general health, as well as stomach, quite restored.

June 28. The pedicle in a sloughing state, attended with considerable foetid discharge in proportion to the size of the part. The trace of the aneurismal spot less conspicuous. Active compression renewed,

July 2nd. On removal of the compression, the immediate surface of the former disease presented a deep, furrowed appearance in consequence of the inequalities of the compression applied, and covered with a rough, coarse, scaly cuticle, which fell off in flakes so as to give a white appearance to the cavity similar to flakes off a white-wash wall.

Altogether, the state of things bore a decidedly different appearance and character to that of the former complaint.

ility of the part ; no rising upon rather rough examination dentation with the thumb and finger, over and immediate upon the former aneurismal spot ; and which occasioned patient to exclaim, "Aye, Sir, you would'nt have done that months ago !" No cutaneous blood-vessels ;—nothing of vitality appears ; but on the contrary, a reduced and dried, and altogether wholly altered state of things.

Curious fact is attendant upon the internal and progressive evolution of the diseased mass, viz :—that although the pedicle of the former fig-like process, with its two conspicuous blood-vessels have long since sloughed away, that still a succession of duplicature of skin, or under process, is from time to time supplied ; evidently a *new succession*, for instead of each being a narrow neck with two conspicuous blood-vessels, the neck of each, on the contrary, immediately in contact with the diseased part of the remaining aneurismal skin spot, is now just as broad as the aneurismal spot itself ; and forming no neck to the lower portion below, but equally broad with it, and covered with the same coarse, scaly cuticle, without a trace of blood-vessel, or of the aneurismal skin spot itself—showing in fact, that it is a continuation of it ; and which is gradually slid off, or shed, upon the gradual subsiding of the internal aneurismal mass, something after the manner of a *land slip* ; and just in the same way precisely, as the fig-like process was in the first instance produced, viz :—from the subsiding of the up-raised tumour, formerly described in the history of the case ; here the diseased and distended integument, which covered the exterior of the diseased, or aneurismal mass, *by such subsiding*, is like a sort of avalanche—*was slid off*—and formed, as it has been said, often-time spoken of fig-like tumour, or appended process.

On this new appended, or slid down cuticle and skin, a continual sloughing goes on by discharge ;—and thus it will go on as long as there is any internal disease to be obliterated ;—therefore it is that active pressure is still kept up. The patient's health is excellent.

July 19th. The covering integument of the aneurismal spot and appendage this day presented a perfectly smooth and healthy cuticle ; marking the progressive change going on from the former report. July 26th.—The integument of the aneurismal spot and small appendage this day presented a rough, scaly surface, and the appendix in a shrivelled and dried state : and

thus, what remains of the former disease, is shrinking crumbling away. August 2d.—To-day the cuticle of the and appendix portion was smooth, and of delicate texture. Some discharge had been effected. Two 5-yard rollers are only employed, and with as much effect as when 40 yards were formerly used. August 9th.—The cuticle over the spot of the appendix rough and scaly. In speaking of the former state of the diseased leg to its now wonderfully changed condition the patient described the effect of cold, at times, as well as heat upon the disease; and observed, "that people, even Medical gentlemen themselves, who only saw it in its quiet state, could have no idea of its frightful swelling and alarming appearance at times," and named an instance, "the winter before last, after being long exposed to cold, of the sudden and enormous swelling of the leg itself, (holding both her hands out with extended fingers in a cradle-like form, to show the size of the limb, and which would have taken in the body of a well-grown child of two years), as well as rising of the aneurismal spot into a frightful mass of several inches—so frightful, that her mother as well as friends were distracted and alarmed, and ran out of the room, thinking it would burst."

This fact was elicited by my simply asking the patient "whether the hot weather had now the least effect upon the limb or the part;" her reply was, "not in the least:—formerly both *cold* as well as heat used to affect it," and then she made the statement just given of the frightful rising up and enlargement. And it is here just stated, as the facts of this case occur, time after time; instead of throwing them together to give a form and regular dress to the case. The simple and only object being truth, viz:—the detail of a very formidable disease, and the highly important practical results which may be derived from the employment of compression in a vast range of various diseases when scientifically managed.

August 16th. What remains of the former disease is in a very diminutive and wasted state, although very slight compression only has been used; the patient remarked upon the diminished state in allusion to its former morbid state, and observed, "they, (two Surgeons and a Physician in consultation upon the case) after it had burst, passed a probe upwards and on one side towards the bone (the shin) several inches; while all the time it was bleeding profusely in a wash-hand basin but not throwing out blood to a distance as it did when it first bursted."

again evidence is afforded of the state and nature of the formidable disease before it came under the treatment of compression.

August 30th. The remains of the disease gradually subsiding, the part drying away; the patient remarking of the pedicle, "it is scarcely any of it." This, as well as the spot is covered with dry, scaly cuticle; whilst the skin of the former aneurismal spot is seen gradually, from time to time, blending with the surrounding integument. Nothing can be more remarkable than the retrograding of this case into health. A degree of pressure was placed over the part, and the leg was rolled. The patient's health is excellent.

16th. To-day the cuticle of the spot is perfectly smooth; the small pedicle rough and scaly. 13th.—The pedicle in a very diminished state.—The cuticle of the spot rough. The former aneurismal spot can now be taken up between finger and thumb.

1. Jan. 10.—Since the last minute in September, the disease gradually subsided into a state of health; and the compression diminished to mere rolling, sometimes the patient moving the rollers herself. About six weeks back, the limb was injured by a desperate fall in consequence of her pattering against an iron railing, which threw her violently on the side and injured her dreadfully. The leg was swollen and discolored, and the veins enlarged; but not the slightest appearance of enlargement or pain felt about the part, which was once the seat of so formidable a disease.

Today an inspection of the case took place with Dr. Sandys in consequence of the subjoined note from Capt. Toup Nicolas Belleisle,* and he questioned the patient, at my request, about all the leading points of the case; and then, in reference to the minutes of the case which are now here published, found the facts to tally with those she had just stated. Before

35, George-Street, January 1st.

Dear Sir,

May I beg to introduce my two young friends Dr.'s Martin and Sandys, the assistant Surgeons of the Belleisle; and to request of you to explain your system of bandaging and compression, which, as I have myself witnessed such extraordinary cures at Looe; and perhaps you may be enabled to shew me some cures of a similar kind that you have made in this neighbourhood.

And I am, dear Mr. Young,

Very truly yours,

J. TOUP NICOLAS.

this examination I had not seen the limb for a fortnight, patient having applied the rollers herself.

Dr. Sandys minutely examined the leg; the integument quite flaccid over the former aneurismal disease; and w could be taken up freely between the finger and thumb, inding the skin mark which is left as if from a scald, but w is perfectly smooth and even with the skin.

Dr. Sandys expressed his entire conviction of the formidable nature of the case, the entire removal of the dise and the now perfect health of the limb.

Feb. 21st. Since the last report the leg had been seen once, the patient managing the rollers herself, which are employed chiefly for the recovery of the integument of the o ancle, which formerly was so enormously distended, but w has now nearly recovered its natural state; the leg other being in a perfectly healthy condition, the patient observ "I really think it stronger than the other." To-day's re also affords the gratifying confirmation, that throughout all late extremely cold and boisterous weather the limb has remai in every respect perfectly easy and unaffected, though the pat has been much exposed and out in all weather. So far the testing the case in almost every possible y, by extre of heat and cold, and severe straining and using as wel strong exercise, it may be said to be entirely a successful The patient is in excellent health.

The entire command of the compression treatment over 'Aneurism by Anastomosis,' which has so often proved f in children, commonly known by "mother's marks," has b also proved, since the one so cured in 1828 and 29, in instance of Mr. Kennerley's child, the engraver and ar of London. This was a frightfully formidable case of co derable bulk and height, and situated upon the windpipe. C of the pressure plates used in this case the author has now him; it measures full two inches across, and nearly as m in diameter; made up with tea lead and plaister straps to thickness of three quarters of an inch, and is of the firm texture. The internal plaister bearing the marginal mark of aneurism.

Before it came under the treatment of compression, a cons tation was held upon the case by Messrs. Lawrence, Vince and Stanley, Surgeons, in the Board-room of St. Bartholome Hospital, who declared upon the fatal nature of the disea

little, if any chance of saving life even in the attempt
oving it by the knife.

four years after, (1833) the author was met by the
f the little patient, who told him she was grown a fine
g girl, and with scarcely a visible mark left of the
disease.

years ago it was the intention of the author to have given
of cases to 'The Lancet,' and among them some which
Coup Nicolas alludes to in his note now published in
minutes; but severe and protracted illness prevented the
from accomplishing this object. For the present, how-
e trusts these minutes will be sufficient to awaken the
consideration both of the profession and the public.
cases formidable in their nature and highly interesting,
y going on successfully under the treatment.

The ~~Report~~ on this Case, some
20 years after its Case, was -
But the Patient continued in
best Health & Spirit - and the
under very active, and often
time, extreme exercise, perfect
and - and Strong - S. Young

R. White Stevens, Printer, Parade, Plymouth.

May 26/43



