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CLINICAL SURGICAL REPORT

FOR THE YEAR 1871.

BY

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THE following paper contains a short statement of the surgical practice of my Wards in the Glasgow Infirmary from 1st January, 1871, till 1st January, 1872. The statistics are compiled from the Ward Journals by my present house surgeon, Mr Wm. J. Fleming.

The number of male patients admitted to residence during the year was 251; female, 145; total, 396. This is exclusive of out-patients who were admitted temporarily, but were enabled to go home the same day, after having their injuries attended to. An accurate record has been kept of such cases only since the 1st of May, and since that date 81 have been treated in my wards, making a total of 477 in the year. Of the whole number of in-patients 367 were dismissed cured or relieved, and 29 died; not a large proportion, when it is considered that many of the patients were admitted in a hopeless condition—not for treatment, but to lie till death put an end to their sufferings.

The table of casualties exhibits not only the value of our Infirmary to the working population, but its importance as a clinical school. Some hospitals may be richer in the rarer

forms of surgical disease, but few are equal to it as a field of observation in the every day occurrences of surgical practice.

SIMPLE FRACTURES—

Thigh,	20
Tibia and Fibula,	21
Tibia,	1
Fibula,	2
Humerus,	5
Radius and Ulna,	4
Radius,	8
Ulna,	2
Clavicle,	10
Ribs,	6
Spine,	1
Pelvis,	2
Skull,	1
Lower Jaw,	1
Bones of Nose,	2
Astragalus,	1
Metatarsals,	1
Metacarpals,	1
Olecranon,	1
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	90

SMASHES—

Leg,	3
Arm,	3
Foot,	2
Hand,	2
Forearm,	2

COMPOUND FRACTURES—

Thigh,	3
Tibia and Fibula,	9
Tibia,	2
Patella,	1
Humerus,	1
Skull,	1
Radius,	1
Radius and Ulna,	1
Fingers,	20
Os Calcis,	1
Lower Jaw,	1
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	41

DISLOCATIONS—

Hip,	1
Knee,	2
Shoulder,	7
Elbow,	3
Ankle (Compound),	1
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	14

RUPTURE of Ligamentum Patellæ	1
Of Extensor Tendon of Knee,	1
SCALP Wounds,	Many
CUT-THROATS,	3

During the year 151 operations of greater or less magnitude were performed, and of these 140 recovered, while 11 died. Of the major operations I may instance that of amputation of the thigh, which was performed nine times, with only one death. Last year there were nine amputations of the thigh without any deaths. Such a state of matters points to the healthy hygienic condition of the hospital, as well as to the careful nursing of the patients.

I shall first give a few particulars relating to the fatal cases, then allude to the more important operations during the year.

Cases of death following an operation :—

1. Mrs D., aged 50. Strangulated hernia of three days duration. Bowel gangrenous, when exposed by operation. Died on the 4th day.

2. Mrs B., aged 47. Ovarian tumour. Ovariectomy. Pro-

gressed favourably for eight days, when peritonitis set in, and she died four days after.

3. Mrs O. Ovariectomy. Many adhesions. Protracted operation. Death in two days from prostration.

4. Mrs W., aged 50. Small cystic tumour of mamma. Patient took an acute attack of pleuro-pneumonia, followed by pneumo-thorax, and died of the effects of this disease; the wound doing well.

5. Mrs B., aged 59. Strangulated femoral hernia. Bowel gangrenous. Died same day.

6. John C., aged 50. Admitted with infiltration of urine, and sloughing of perineum. Perineal section was performed in the putrid sloughs. There was temporary relief, but the patient died delirious in 24 hours.

7. Samuel S. Psoas abscess. Opened antiseptically, but from restlessness of patient dressings became displaced; inflammation supervened, and hectic caused death in a few days.

8. John H. Compound dislocation of ankle. Phlegmonous erysipelas. Amputation of leg. To be referred to among the operations.

9. Pat O'H., aged 11, was run over by a cart wheel, fracturing pelvis, and causing internal injuries. Retention of urine occurring, perineal section was required in the contused perineum, but the boy died delirious during the night.

10. R.B. Exostosis of tibia, which was excised. Subfascial cellulitis occurred, and patient, who was, when too late, discovered to have Bright's disease, succumbed.

11. M. M'L. Very bad compound fracture of thigh. An endeavour was made to save the limb. Phlegmonous erysipelas set in. Amputation was performed, but a rigor having occurred, he died on the 4th day.

A perusal of the particulars of some of the above cases will shew that death following the operation was inevitable, from causes wholly beyond the reach of the operator. Hospital surgeons are often induced to operate as a *dernier resort* in cases where there seems almost no hope of recovery, but

where the patients are entitled to the little chance of success which remains.

Besides these, death took place among the other patients in the wards as follows:—

1. J. S., aged 63. Compound fracture of tibia and fibula. Sloughing took place, and patient died of exhaustion.

2. H. M., aged 18. Admitted with some internal injuries, from having been bruised between the buffers of two railway waggons. Died on the 10th day, with symptoms of peritonitis.

3. D. M., aged 61. Admitted with his throat cut between the hyoid bone, and thyroid cartilage. The vocal apparatus was seen perfectly in the lower section of the wound—the vocal cords being clearly visible, and of a pale pink colour. Patient could swallow, and took some sustenance, but became delirious, and died on the 6th day after.

4. S. W., aged 52, while tipsy, fell and broke three ribs, and sustained some internal injuries. Had extensive emphysema. Broncho-pneumonia supervened. He lived three weeks.

5. A. A., aged 54, while he lay at work on his side in a coalpit about three tons of coal fell on him. He sustained a fracture of the clavicle, and a very severe fracture of five or six ribs. Traumatic delirium soon came on, and he died four days after the accident.

6. W. C., aged 22, fell from the the top of a house, fracturing three ribs, causing extensive emphysema. He died in delirium thirty-six hours after the accident.

7. P. M'G., aged 18. Admitted with a fracture of right femur and left leg, both with wounds extending very close to the seat of fracture. They were treated antiseptically. On the 6th day symptoms of tetanus came on, which became rapidly acute, and he died in twenty-four hours.

8. P. M' L., aged 55. Sustained a double fracture of the right thigh, and a compound fracture of the patella. An attempt was made to save the limb by treating the compound fracture antiseptically, and great care was bestowed in having the fractures carefully adjusted on a

suitable splint. But during the night the patient loosened all the bandages, which were found lying in the bed beside the limb. Inflammation was set up in the knee, which extended up into the bruised thigh, and all hope of saving the limb being gone, free incisions were made into the knee, in the hope of getting the tissues into a suitable state for amputation. But phlegmonous erysipelas set in, and patient became delirious, and soon died.

9. J. G., aged 42. Admitted with a compound fracture of left femur, simple fracture of radius, some internal injury and symptoms of concussion. The symptoms of concussion passed into those of delirium, in which condition he died.

10. J. M'D. Injured by the explosion of the boiler of a traction engine. Wound puncturing right knee joint. Compound fracture of nasal bones. Scalp wounds. Wound over left eyebrow. He became wildly delirious shortly after admission, and it was almost impossible to manage him. Notwithstanding, the dressings were kept applied to the wound, which progressed favourably. Although the delirium became lessened under repeated doses of opium, it recurred, and he never entirely regained consciousness, but died after some days' suffering.

11. Mrs M'G., aged 50. Sustained a compound fracture of leg near ankle. The bones were got well into position, and the wound was treated antiseptically. Hæmorrhage occurred four hours after, which was checked, and the antiseptic dressings were applied. She did not rally well from the accident, being soft and flabby. On the sixth day, the wound doing well, acute tetanus occurred, which proved fatal in 48 hours.

12. Mrs D., aged 50. Received a fatal injury by the fall of part of a house. She had several ribs broken, with emphysema, and had also serious internal lesions. She lived only 2 hours.

13. S. C., aged 6. Reduced to a skeleton by cancrum oris, following measles. She also had a severe cough. She only lived six days.

14. J. N., aged 62. Admitted with fracture of neck and

humerus, which was put in proper position and retained *in situ*. Patient was found to be affected with broncho-pneumonia of both lungs, and very far reduced in strength. She died of the chest affection in eight days.

15. M. C., aged 5, was burned by her clothes catching fire. The whole surface of her body was partially charred. She lived in great agony till next day.

16. A. F., aged 9, was admitted with her clothes still hot from charring, by having fallen on the fire. She was extensively burned. She lived only a few hours.

17. J. D., aged 67. Admitted with intracapsular fracture of the femur. But her lung was in an advanced stage of consolidation, of which she died in two days.

18. M. M'G., aged 16, a perfect picture of struma. Ulcers on back and legs. Reduced to a skeleton by want and disease. Profuse diarrhoea. She was most carefully tended, but did not recover. Lived only a few days.

I append a few notes on the statistical tables of the operations.

Amputation of the Thigh.—Nine cases, viz., 2 primary; 1 secondary after accident; 6 for disease; 8 successful, and 1 death.

The successful cases are sufficiently explained in the table. The single fatal case was a case of compound fracture of the femur. It was treated antiseptically, but unsuccessfully, the discharge becoming putrid, and the tissues inflamed. Amputation at the middle of the thigh was performed, but rigors supervened, and he died of pyæmia—one of the few cases of this disease this year.

I may recall the fact that last year also I had in hospital practice 9 cases of amputation of the thigh—without any deaths, so that in two years I have had eighteen amputations of the thigh, with one death in all.

Amputation of the Leg.—One operation, with a fatal issue.

This fatal case was a compound dislocation of the ankle, in which an attempt was made to save the limb, in a dissipated man, by treating it antiseptically. He was restless

and feverish from the outset, and phlegmon supervened. Amputation at the knee was performed by Dr Patterson in my absence, but the man did not rally. He had rigors the day after the amputation, and died of pyæmia.

Amputation at the Ankle.—All successful. Seven by Syme's method. 1 by Pirogoff's plan for accident.

Amputation at shoulder joint successful—for a severe accident, performed by Dr Patterson during my absence.

Amputation of Arm.—Seven cases—all successful. 6 primary for accident. 1 for destructive disease of elbow.

Amputation of Forearm.—Four cases, all successful.

Ovariectomy.—Three cases—one successful, two died. The successful case made a most satisfactory recovery. The two fatal cases were examples of most extensive adhesion of the cyst to the abdominal walls. It required the utmost care to remove the adherent cyst walls. One of the patients did not rally, but died next day. The other, to my perfect surprise, was comfortable and well in every way for six days, but the inevitable signs of low peritonitis—flagging pulse—slight subsultus—abdominal flatus without pain, were observed on the sixth day with the invariable fatal result.

Lithotomy.—Two cases, both successful. One in an adult male by the rectangular method. Another in a woman from whom the stone was removed by the lateral incision in the left vaginal wall, with a good result.

Another of the operations recorded, which deserves special mention, is a case of ligature of the femoral artery in the antiseptic method for traumatic femoral aneurism, the particulars of which were given in the Clinical Record last winter. The result was most gratifying. The sac was opened and the artery tied with antiseptic catgut above and below the wound.

Rhino-plasty.—A capital result from a flap made from the forehead. The resulting nose was a very fair substitute for the original organ.

Four Amputations of Fore-arm.

J. M. I., aged 19	May 22	Smash of hand	.....	Amputation through wrist	.....	Successful
J. G., " 13	" 26	" (pistol explosion)	.....	"	"	"
P. C., " 6	July 28	Admitted with gangrene of arm and fore-arm from tight bandaging	.....	"	"	"
E. S., " 14	Sept. 8	Smash	.....	"	"	"

Twenty-One Amputations of Fingers.

All successful.

Two Excisions of Elbow.

J. M., aged 8½	Aug. 4	Strumous elbow	.....		Successful
J. A., " 30	Sept. 10	" with ankylosis	.....		"

Thirteen Excisions of Bone.

A. G., aged 32	Jan. 15	Ununited fracture and necrosis of humerus	.....	Necrosed ends excised	.....	Successful
A. M'K., " 12	" 12	Necrosis of tibia	.....	Removal of sequestrum	.....	"
L. K., " 22	Feb. 8	Necrosis of external malleolus	.....	Sequestrum removed	.....	Improved
A. K., " 43	May 31	Caries of wrist	.....	Excision of some of the bones	.....	"
M. F., " 22	" 22	Necrosis of femur	.....	Removal of sequestrum	.....	Successful
P. M'F., " 16	" 16	" lower part of femur	.....	Sequestrum removed	.....	"
J. M'C., " 10	July 2	"	.....	Removal of sequestrum	.....	Improved
W. S., " 12	Aug. 1	Necrosis of shaft of humerus	.....	Sequestrum removed	.....	Successful
J. M'C., " 16	" 16	Disease of os calcis	.....	Excised	.....	Died
J. M'C., " 32	" 32	Exostosis of tibia	.....	Part of os calcis sawn off	.....	Successful
R. B., " 37	Oct. 23	Ulcer over heel—20 years' standing	.....	Sequestrum removed	.....	"
T. M'M., " 40	Sept. 3	Necrosis of femur	.....		
J. L., " 24	Nov. 3					

Cellulitis and hectic. Ulcer grafted, October 23rd.

Seven Dislocations of Shoulder.

All successful.

Three Dislocations of Radius and Ulna.

Successfully reduced.

Three Dislocations of Lower Extremity.

One of hip on dorsum. Two of knee backwards.

Two Lithotomy.

T. B.....aged 65....Feb. 20...	Male.....Successful...
Mrs M.,... " 51....July 5...	Lateral operation through labium..... "

Five for Hernia.

M. D.,.....aged 50...	Feb.	20...	Strangulated femoral.....	Stricture divided.....	Died.....	Bowel gangrenous.
"	"	59...	"	"	"	"
M. B.,.....	"	59...	June	10...	.....	Peritonitis.
R. M.,.....	"	70...	July	20...	Double hernia.....	Taxis.....Successful...
J. T.,.....	"	22...	Sept.	3...	Strangulated femoral.....	Stricture divided.....
I. B.,.....	"	18...	Nov.	22...	Right oblique inguinal.....	"

Three Ovariectomy.

M. A.....	aged 31....Jan. 59	Ovarian tumour.....	Ovariectomy.....	Successful...Used clamp.
"	" 47....March 4...	"	"	"
M. B.....	" 47....March 4...	"	"	Died.....Of peritonitis.
"	" 47....March 4...	"	"	"
Mrs D.....	" 47....March 4...	"	"	Of shock in twenty hours.

Three Tenotomy.

J. M'L.,.....aged 7...	...Double talipes varus....	.....	Successful...
W. W.,.... " 12....June 25...	...Stiff bent knee.....	Tenotomy & forcible straight- ening.....	"

Three Cases of Forcible Dilatation of Urethral Stricture.

All treated with Holt's Dilator—Successful.

One Ligature of Artery.

W. G.aged 17...Jan. 26...Traumatic femoral aneurism.....Ligature of femoral.....Successful...
On the ligature of an artery

Six Cheilo-Plastic.

J. H.,.....	aged 15....	April 5....	Single harelip.....	Edges pared and sewn.....	Successful....
T. M'C.,...	" 1½....	June 9....	" "	" "	" "
J. M'C.,...	" 27....	July 20....	Rhino-plasty.....	Flap from brow.....	" "
M. M.,.....	" 4....	Sept. 27....	Single harelip.....	Edges pared and sewn.....	" "
M. M.,.....	" 4....	Oct. 11....	" "	" "	" "
T.,.....	8 mths....	" 20....	" "	" "	" "

Twenty-Four Excisions of Tumours.

H. M.,	aged 51...	Jan.	19...	Fatty tumour.....	Excised.....	Successful.....
J. C.,	" 31...	"	15...	Adenoid tumour.....	"	"
M. L.,	" 48...	"	11...	Scirrhus of mamma.....	Gland excised.....	"
M. M'L.,	" 65...	Feb.	9...	Epithelioma of tongue.....	Excised.....	"
M. M'L.,	" 65...	March 24...	Recurred epithelioma of tongue.....	Anterior half of tongue excised.....		"
E. L.,	" 16...	Feb.	26...	Enlarged tonsils.....	Guillotine.....	"

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