

Case of preternatural growth in the lining membrane covering the trunks of the vessels, proceeding from the arch of the aorta / By John Yelloly.

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Yelloly, John, 1774-1842.

Publication/Creation

London : Printed by G. Woodfall, 1823.

Persistent URL

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OF
PRETERNATURAL GROWTH
IN THE
LINING MEMBRANE
COVERING THE TRUNKS OF THE VESSELS, PROCEEDING
FROM THE ARCH OF THE AORTA.

By JOHN YELLOLY, M.D. F.R.S., &c.

FROM THE TWELFTH VOLUME OF THE MEDICO-CHIRURGICAL
TRANSACTIONS, PUBLISHED BY THE MEDICAL AND
CHIRURGICAL SOCIETY OF LONDON.

London:

PRINTED BY G. WOODFALL, ANGEL COURT, SKINNER STREET.

1823.

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COVERING THE TRUNKS OF THE VESSELS, PROCEEDING
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Read July 8, 1823.

A MAN of 56, of a robust and healthful appearance, and of temperate habits, dropped down suddenly, when working in his garden in my neighbourhood, in the month of June, 1822. His fall was seen by some of his neighbours, who instantly went to his assistance, and found him motionless, in a state of complete insensibility, and without respiration. Not the smallest signs of life were afterwards exhibited.

He was represented by his widow and friends to have previously enjoyed very good health, and never to have made the smallest complaint of pain, or derangement of function. There was no tur-

gescence nor lividity of countenance at the time of his fall, nor half an hour afterwards, when I saw him.

On the day after his death, the body was examined by Mr. Cross, of Norwich, and myself, and the following appearances were noticed.

A small portion of fluid was found between the pia mater and arachnoid coat of the brain; a slight ossification was observed in the internal carotids; and the vertebrae were of more than their ordinary size.

The heart was rather larger than usual, and with both sides remarkably tense and turgid, but particularly the left, which was exceedingly hard and resisting. During the operation of taking out the heart and large vessels, for facility of examination, the firmness of the left side was a little diminished, as if from a portion of the contained blood having escaped by the aortic opening.

The parietes of both ventricles were firm and thick, more especially those of the left. All the cavities were filled with blood, in a considerable degree coagulated. The coronary vessels, and the valves, were all of them healthy. The whole of the ascending aorta was somewhat increased in diameter, and its inner surface, in many places, covered with firm irregular scales of ossification.

The vessels which were transmitted from the arch of the aorta, exhibited remarkable and interesting appearances.

The trunk of the *arteria innominata*, and the trunks of the left carotid, and of the left subclavian arteries, were all of them in a considerable degree plugged up with a growth from the lining membrane of the artery, having the same general nature and appearance as the lining itself, and without any ossific deposition.

In the *arteria innominata*, this preternatural growth extended, irregularly, about an inch up the vessel, the calibre of which was reduced by it, to less than one-third of its usual dimension. In the left carotid, it was confined nearly to the opening of the trunk into the aorta; but the orifice was diminished to such an extent, as to admit not more than the passage of a common-sized probe.

In the left subclavian, it extended about half an inch up the vessel, the cavity of which it had diminished to the extent of a small slit. No other morbid appearances were observed.

It was a matter of much surprise to me, that with alterations of structure so considerable as those which I have described, no symptoms of previous indisposition should have manifested themselves. More particular inquiry, however, convinced me,

that this account was not altogether accurate; for though it was quite true, that the poor man's general health had always been good, yet he had experienced, within the last two years, two or three attacks of sudden faintness, from which however he soon recovered. The state of his pulse was not known.

The interruption to the passage of the blood in the vessels supplying the head and upper extremities, would necessarily require a greater effort on the part of the heart, to effect circulation through them; which would produce an augmentation of its parietes, and an increase of its muscular power: but what were the immediate circumstances which occasioned syncope and death, by giving rise (as I imagine took place in this case) to an interruption to the passage of blood to the sensorium, and therefore a suspension of the supply of nervous influence to the heart, it is not easy to determine.

I have not met with any record of a case similar to this; but the elevation into protuberances, of the inner membrane of arteries, in other situations, is mentioned by pathologists*.

A sketch of a portion of the arch of the aorta,

* Vide *Morgagni de Sedibus et Causis Morborum*, Epist. xviii., Art. 8; xxvi. 17; xxvii. 28; lxxiv. 5; and *Baillie's Series of Engravings to illustrate the Morbid Anatomy*, Plate 14, fig. 3.

the first of these was the discovery of gold in California in 1848. This discovery led to a great influx of people to California, and the state became one of the most populous in the Union. The second of these was the discovery of gold in Colorado in 1859. This discovery led to a great influx of people to Colorado, and the state became one of the most populous in the Union. The third of these was the discovery of gold in Nevada in 1859. This discovery led to a great influx of people to Nevada, and the state became one of the most populous in the Union. The fourth of these was the discovery of gold in Idaho in 1860. This discovery led to a great influx of people to Idaho, and the state became one of the most populous in the Union. The fifth of these was the discovery of gold in Montana in 1862. This discovery led to a great influx of people to Montana, and the state became one of the most populous in the Union. The sixth of these was the discovery of gold in Wyoming in 1869. This discovery led to a great influx of people to Wyoming, and the state became one of the most populous in the Union. The seventh of these was the discovery of gold in Utah in 1871. This discovery led to a great influx of people to Utah, and the state became one of the most populous in the Union. The eighth of these was the discovery of gold in Arizona in 1876. This discovery led to a great influx of people to Arizona, and the state became one of the most populous in the Union. The ninth of these was the discovery of gold in New Mexico in 1878. This discovery led to a great influx of people to New Mexico, and the state became one of the most populous in the Union. The tenth of these was the discovery of gold in Texas in 1880. This discovery led to a great influx of people to Texas, and the state became one of the most populous in the Union.

The discovery of gold in California in 1848 was the first of a series of discoveries that led to the great influx of people to the western states. The discovery of gold in Colorado in 1859 was the second of these discoveries, and the discovery of gold in Nevada in 1859 was the third. The discovery of gold in Idaho in 1860 was the fourth, and the discovery of gold in Montana in 1862 was the fifth. The discovery of gold in Wyoming in 1869 was the sixth, and the discovery of gold in Utah in 1871 was the seventh. The discovery of gold in Arizona in 1876 was the eighth, and the discovery of gold in New Mexico in 1878 was the ninth. The discovery of gold in Texas in 1880 was the tenth, and the discovery of gold in California in 1848 was the first of a series of discoveries that led to the great influx of people to the western states.

Fig. 1.

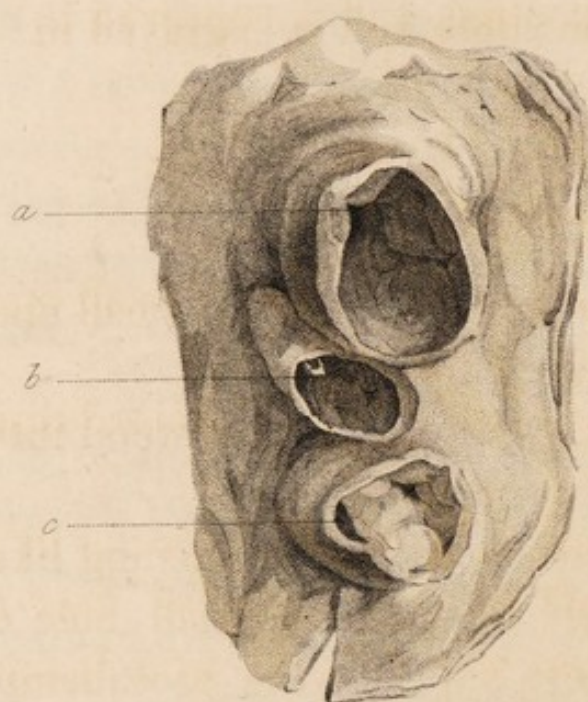


Fig. 2.



containing the arteries proceeding from it, accompanies this communication, and is engraved in

PLATE XI. FIG. 1.

EXTERNAL VIEW.

- a.* The arteria innominata, having a small opening at its upper part.
- b.* The left carotid, with a portion of wood thrust through the opening into it.
- c.* The left subclavian, having an opening like a slit on the left side, and a small hole extending a short way into the protuberance of the inner membrane, a little above it.

FIG. 2.

INTERNAL VIEW.

- d.* The opening into the arteria innominata from the aorta.
- e.* The opening into the left carotid, thrown a great deal to one side.
- f.* The opening into the left subclavian.

Patches of ossific matter are deposited irregularly over the inner surface of the aorta, around, but not immediately at, the openings of these arteries.

CARROW ABBEY, NORWICH,

July 7, 1823.

containing the arteries proceeding from it, accom-
panied this communication, and is engaged in

PLATE XI. FIG. 1.

EXTERNAL VIEW.

- a. The artery and its branches, a small open-
ing at its upper end.
- b. The left ventricle, with a portion of wood thrust
through the opening into it.
- c. The left subclavian artery, an opening like a
slit on the left side, and a small hole ex-
tending a short way into the protuberance
of the inner membrane, a little above it.

FIG. 2.

INTERNAL VIEW.

- d. The opening into the artery immediately from
the heart.
- e. The opening into the left ventricle, shown in
great detail on one side.
- f. The opening into the left subclavian.

Patches of osseous matter are deposited irregu-
larly over the inner surface of the heart, around,
but not immediately at the openings of these ar-
teries.

Glasgow Academy, November

July 1, 1833.