

Observations on haemorrhoidal excrescences / [Sir James Earle].

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OBSERVATIONS
ON
HÆMORRHOIDAL EXCRESCENCES.

✂ This TRACT is inserted in Mr. EARLE's Edition of
Mr. POTT's Works.

1799.



OBSERVATIONS, &c.

IN the account of Mr. POTT's life I have asserted that he had been remarkably successful in the treatment of those painful excrescences which are produced from within the verge of the anus, and the removal of which when large, firm, and indurated, has generally been thought dangerous and unadvisable. Mr. POTT had entertained a design of writing on this subject, to lessen the apprehension of practitioners, by pointing out in what cases an operation may be safely performed. The method which he employed was not new, it has been described and recommended by writers, and has been frequently practised on piles in a small and flaccid state, but he often asserted he knew no one who would attempt to apply it to the advanced state of the complaint; as far as my experience leads me, I believe his assertion strictly founded, or if it be practised by some, it is by no means

generally adopted. During the last ten years of Mr. POTT's life he had many opportunities of performing this operation; most of the patients I attended with him, and found that several of them had previously consulted other eminent surgeons from whom they had not met with a proposition for a radical cure; in others the disease had been absolutely abandoned as an incurable cancer. For these reasons Mr. POTT thought it a subject well worthy of the consideration of practitioners. It is certainly a disease which, whoever labours under, must lead a miserable existence, consequently every attempt towards the relief of it must be proportionably valuable. I therefore conceive that a few hints on this subject will not be an improper appendix to the foregoing treatise, or unacceptable to the reader. As I profess only to give a sketch of the disease, and such an account of our author's treatment of it, as I can collect from memory, a perfect history will not be expected from me. I can only undertake to point out its leading characters, and those circumstances in the operation which chiefly deserve attention; and sincerely regret that they

they were not laid before the public in Mr. POTT's superior manner.

The intestinum rectum is well known to be subject to a variety of diseases, from various causes; from its structure, use, and office, and from its situation, which renders it liable to be pressed upon by the whole power of the abdominal muscles: it is also sensibly affected by its connection with other parts in its vicinity, and it often affects them.

The diseases we are to treat of are tumors originally formed within the rectum, and produced by a distention of the hæmorrhoidal vessels: in this state they are considered as inward piles, and give little trouble or uneasiness. In more or less time the tumors being increased in size are forced down in going to stool, and return back when the abdominal muscles cease to act; soon after, grown larger, they return with difficulty, and require a considerable time and pressure before they will return: by degrees they are more irritable and painful to the touch; at length they become indurated and stationary, and are not to be reduced by any means, but are extremely inconvenient, and painful in the greatest degree. In some cases, while they are

in this situation, the sphincter ani binds so tight round their basis as to produce a mortification of them, and thus effects a natural cure, analogous to that which we recommend.

Mr. POTT observed, that it might afford matter of surprize to find that such tumors on their first production contain nothing but coagulated blood; perhaps this blood, at first either stagnating in the hæmorrhoidal vessels, or possibly effused under the internal coat of the rectum, may, in time, become organised; this organic mass being irritated by frequent and severe pressure, may enlarge and become firm and fleshy excrescences: in this state they frequently furnish a disagreeable sanies, or bloody discharge, and acquire an irritated, malignant appearance.

There are other tumors produced in this part from various causes; as an enlargement of the sebaceous glands, at the verge of the anus, and excrescences arising from a venereal or cancerous disposition in the habit, which in general are easily distinguishable from those here described.

The venereal verrucæ or excrescences are a frequent symptom of that poison, and are well

well known to practitioners. They differ in every respect from the tumors we treat of: the basis of them is generally broad; they do not arise from the intestine, nor particularly from the verge of the anus, but indiscriminately from thence and from the skin in the neighbourhood. They are rather flat than elongated: they may be tender to the touch, but, unless when exasperated by stimulating applications, are seldom productive of pain. In females, the same species of excrescence frequently surrounds the anus, covers the external parts of the labia pudenda and the internal of the thighs, seeming to be propagated in moist parts by contact: by neglect they sometimes spread over the groins and pubis, making a large fungous mass, separable into distinct excrescences. It is useless to attempt the removal of them, until the poison be eradicated from the constitution, when, though sometimes obstinate and liable to reproduction, they may generally be made to shrink away by proper topical applications.

Those which arise from a cancer within the rectum, and being thrust out appear externally, are more liable to be confounded with the complaint we mean to describe, as

they resemble each other in many circumstances: both are hard, swelled, and painful; both at times furnish a disagreeable sanious discharge; in both cases the patients have the same leaden pallid countenance. There are however some leading features of distinction which may be noticed; in the cancerous protrusions the basis is generally harder, more incompressible, and broader; and has its origin higher up in the rectum, commonly occupying the whole circumference of the intestine, which so straitens the passage that the fæces are expelled with difficulty, and are compressed into a flat or angular form. In the cancerous affection of the rectum, the parts sometimes feel soft like a rotten substance. The pain of the cancerous, or malignant fungi, is unremitting; whether they are external, or returned within the sphincter, the patient is never at perfect ease, but complains of shooting pains in the region of the loins.

The pain attending the hæmorrhoidal tumors is sometimes great while they are external; but when this arises from the stricture of the sphincter, if they can be returned within the rectum, it soon ceases. When they have been long protruded in
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an irreturnable state, by degrees they become accommodated to frequent pressure and unless irritated by an access of inflammation to the constitution from exercise, wine, improper food, or other causes, they are commonly not so painful as at their first exit.

In both species of tumor anodyne injections give ease, but less in the cancerous; the return of pain also in them is more immediate, more violent and lancinating. In the present state of medical knowledge we are confined to a description of this dreadful disease, any chirurgical attempt to remove it would but aggravate the mischief.

A protrusion of the rectum is also not an uncommon complaint in persons of a debilitated constitution: Mr. POTT observed, that people who have accustomed themselves to aloetic purges, are particularly subject to this complaint; and he remarked that it is sometimes only a symptom of a generally relaxed state of the internal coat of the intestine, through the whole extent of the canal; in which case he always recommended the drinking lime-water, which, joined with the bark, he had found to be very materially serviceable. He observed that this complaint
might

might often be entirely removed by anodyne glysters; but he did not approve of astringent applications to the part.

Fortunately the procidentia ani is not easily confounded with the complaint we are now considering. The two diseases are perfectly distinct; the one is a protrusion of the gut, the other is an excrescence or enlargement of the vessels at the verge of the anus, protruded in many distinct portions or lobes; of a dark, dusky-red colour; and in every respect different from the procidentia abovementioned.

When by long continuance and repeated irritations these tumors are formed into large unreturnable excrescences, nothing but the hand of surgery can give relief; this is the state of the complaint, in which I think the practice of Mr. POTT deserves our attention. However large and formidable the appearance of the excrescences, if there was no symptom of cancerous malignity, nor any contra-indication in the constitution or habit of the patient, Mr. POTT always recommended the removal of them. Having seen profuse and dangerous hæmorrhages from the use of the knife in these cases, particularly in one instance,

stance, in which the patient nearly lost his life, he always preferred the ligature. The following was his method of performing the operation:—When the patient, by straining, as if going to stool, had forced out the tumors as far as could be done, he laid hold of one of each tumor or lobe, separately, with a blunt double hook, and drew it gently outwards until he discovered the basis of it, which is usually smaller and less indurated than the part which has been exposed to friction; then giving the hook to be held by an assistant, he slipped a ligature, previously tied in a loose knot, as near to the basis as possible: when he was satisfied that the ligature comprehended the whole lobe he drew it tight, taking particular care to discriminate between the natural skin and the tumor: none of the former, however elongated, should ever be included in the ligature; for, when the tumor is removed, this will corrugate and retire to its proper place, while the loss of any considerable portion of it, by contracting and straitning the parts, would create an inconvenience severely felt in riding, or any other exercise, and also in the natural functions of those parts. In the same manner

Mr.

Mr. POTT proceeded to treat the remainder of the lobes, one after another, taking care not to include more in each ligature than was necessary; if the basis was very broad, a circumstance which seldom happened, he passed a needle armed with a double ligature through the middle, and tied them on each side.

In this manner I have seen him treat successfully several cases, in which the tumors had increased to a considerable magnitude, particularly two, where they were at least from eight to ten inches in circumference; they had been of long standing and were exquisitely sensible. The patients had long been in a state of hopeless misery, almost wholly excluded from society, debarred from all exercise, and not able to sit but in a chaise percée; the appearances in both these cases were very similar; from the turgidity, at first sight, uniform, but on examination they were divided into distinct tumors; which Mr. POTT carefully separated and treated as has been described. The operation succeeded perfectly well in both; and from that time neither of the patients has experienced the least inconvenience, or return of the disease. I never
saw

saw any kind of mischief or alarming symptom from this method of extirpating this disease, except in one unfavourable subject, who had been liable to complaints about the neck of his bladder; in him the operation brought on a return of his old maladies, strangury and suppression of urine, which induced a necessity of using the catheter for some time; but this subsided, and left him as soon as the tumors were separated. I do not mention this case as a prohibition to the operation, but to shew that it is right to attend carefully to the parts contiguous, which are liable to be affected by the necessary inflammation; that, if the patient has been subject to complaints about the bladder, proper care may be taken to obviate and prevent them. Except this, I know of no harm which ever does, or can arise from the operation. Particular care should be taken to draw the ligature sufficiently tight; if it be at all too slack, some vessels remaining pervious, the circulation will be continued in some part, by which the duration of the pain, and the existence of the tumors will be protracted. In general, the parts losing their nourishment die and drop off in four or five days. I need not mention that a proper antiphlogistic

tiphlogistic regimen both before and after the operation should be observed. An anodyne injection thrown up the rectum half an hour previous to the operation will be efficacious in lessening the subsequent uneasiness; a soft poultice will be found to be the best topical application.

The following cases were obligingly communicated to me by Mr. Harvey, who attended them with Mr. POTT, and took notes of them at the time; they will greatly tend to elucidate the nature of the complaint, and the excellence of the remedy, which I have endeavoured to describe.

C A S E I.

A GENTLEMAN of about fifty years of age, and of a nervous irritable constitution, had been during many years of a costive habit of body, and generally had recourse to aloetic pills to procure stools. About two years before Mr. POTT saw him he first perceived a pain and swelling within the rectum, which was very troublesome whenever he attempted to discharge his fæces; until at length the difficulty of evacuating them became so great, that

that he was obliged to inject oil, and to sit over the steam of warm water, before he could obtain any natural relief. He was obliged to be very strict in his diet, as any food which was apt to occasion hardened fæces most certainly gave him excruciating pain. The frequent strainings had made a prolapsus of the gut habitual; neither could he get rid of the fæces, unless the excrescences were first protruded beyond the anus. In this situation he travelled from Cork to London for Mr. POTT's advice. I should have observed that the surgeons he had before consulted were led to believe, from the usual remedies for the piles not having benefited him, and from the unalterable hardness of the tumors, that they were cancerous. When I first saw him, he was much weakened by the constant irritation, and probably by the continual ichorous discharge, which was so profuse as to wet through many folds of linen in the course of a few hours. Mr. POTT immediately proposed the operation for removing them; and in this case, as in the others, he preferred doing it by ligature rather than by the knife or scissors: round the anus there hung a loose flaccid skin, which Mr.

POTT

POTTER supposed had been a double fold of the inner coat of the gut protruded, and which had lost its natural texture and colour. The first excrescence which appeared seemed large enough to have filled the circumference of the intestine; it had a broader basis than I have usually since seen, therefore Mr. POTTER passed a double ligature through; and tying them on each side left it to slough off, which it did in a few days; afterwards two smaller ones came forward, were held by the hook, and surrounded by the ligature; they also came away in the poultices, and the Gentleman returned home in the course of three weeks perfectly cured.

The progress and symptoms of the other cases were nearly the same, therefore I need not be minute in describing them.

C A S E II.

MRS.—had been many years dreadfully afflicted with this disease, and the surgeons of the town where she resided pronounced it absolutely to be a cancer; her pain prevented her from walking or sitting upright, and she lay on a sofa patiently expecting a painful death.

death. Mr. POTT saw her during one of his excursions to Worcester, she followed him to London, and the operation was performed so successfully, that not only the excrescences were removed, but her health and spirits, which were before wretchedly reduced, were again perfectly restored. The excrescence in this case was large, rugged, and unequal in its surface; it had an ulcerous appearance, and very well authorised the opinion which the surgeons in the country had given of it.

C A S E III.

A GENTLEMAN between thirty and forty came from Carlisle on account of this complaint to Mr. POTT. I have seldom seen a man more debilitated or nervous; the least surprize made him hysterical: he had laboured under the disease about a year; and, from his peculiar irritability, it was accompanied with spasms at the neck of the bladder, pain in the urethra, and a discharge from the penis, as well as from the rectum, which was also protruded. Two excrescences were removed, and afterwards two lesser ones, not having their support, came forward and were

likewise taken away.—This Gentleman suffered more pain at, and after the operation, than in any instance I have seen; he had a small fever, and a great tendency to strangury; with the exhibition of anodyne and proper antiphlogistic remedies he recovered, the protruded intestine returned, the irritation at the neck of the bladder left him, and he gained a very improved state of health.

I have seen many other cases, but do not recollect any material difference in them from those I have already mentioned.

A GENTLEMAN between thirty and forty came from Carlisle on account of this complaint to Mr. POTT. I have seldom seen a man more debilitated or nervous; the least surprise made him hysterical; he had laboured under the disease about a year; and from his peculiar irritability it was accompanied with spasms at the neck of the bladder, pain in the urethra, and a discharge from the penis, as well as from the rectum, which was also protruded. Two excruciations were removed, and afterwards two lesser ones, not having their support, came forward and were likewise