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SUPPLEMENT TO A PAPER

ENTITLED

FURTHER OBSERVATIONS

ON THE

STRUCTURE AND TREATMENT
OF UTERINE POLYPI,

PUBLISHED IN VOLUME XLIV OF THE 'MEDICO-CHIRURGICAL
TRANSACTIONS.'

BY

ROBERT LEE, M.D., F.R.S.

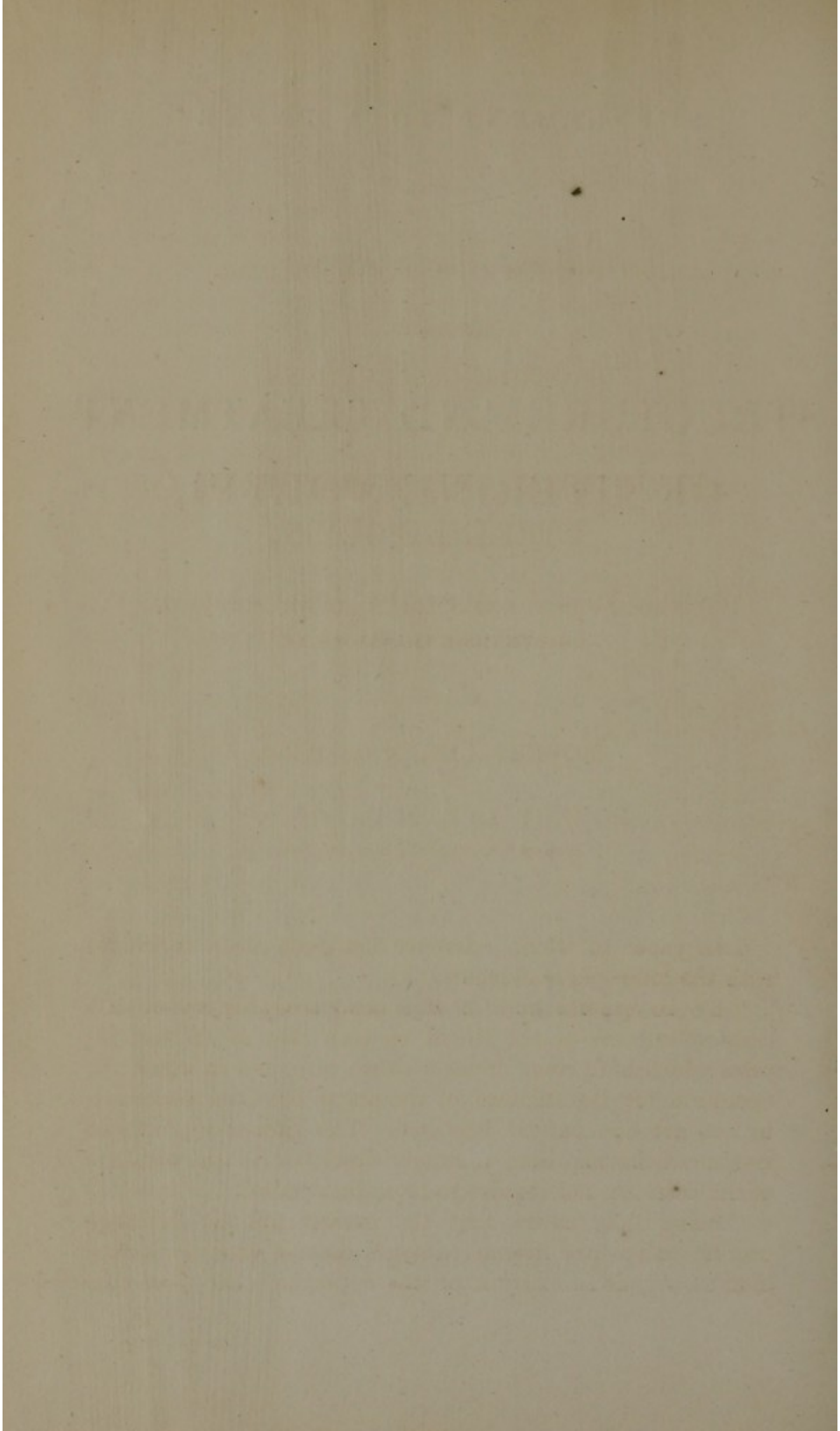
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Received Feb. 10th.—Read May 23rd, 1865.

THE paper to which reference has been made concludes with the following statement :

“By an examination of this condensed history of 105 cases of uterine polypi it will be seen that of the last 50 cases which have come under my own care, and in which the operation for the removal of the polypi has been performed by me, not one patient has died. The various methods of treatment, having been minutely described in the histories of the cases, do not require to be again detailed.

“Being fully aware that the greater number of large uterine polypi are fibrous tumours covered with the lining membrane and a portion of the muscular coat, and that

these polypi have large arteries and veins distributed throughout their substance, in operating upon them I have not ventured to drag them out of the vagina with forceps of any kind and divide their roots with the knife. The ligature has usually been applied in such cases with the bent rod, and the sloughing polypus has been removed when the ligature was long in dividing the root. By this means all the evil consequences which could be produced by the vagina being long filled with a putrid mass have been completely avoided, and to this course I do think may be attributed, in a great degree, the uniform success of operations performed by me of late. Even where the polypi have been of comparatively small size, and the ligature has been applied with the double canula, I have not considered it safe to leave the ligature many days around the root of the polypus when the circulation through the substance had been destroyed and the mass of the tumour was in a sloughing condition. By twisting the canula firmly round, the ligature has frequently passed through the root, and the polypus has been removed several days before this would have happened if the ligature had been merely tightened. Even in cases where the root of the polypus has not yielded to this treatment the ligature has been removed and the dead polypus has come away harmlessly after some days, tepid water having been freely injected into the vagina. In all cases it has appeared to be of the utmost consequence to watch the condition of the uterine organs and of the general system, as it has been clearly proved that inflammation is the most common cause of death after the application of a ligature around the peduncle of a polypus."

Since the publication of this paper in the 'Medico-Chirurgical Transactions' fifteen cases of uterine polypi have come under my observation. Three of these, which were of the most formidable character, from the great magnitude of the tumours and the impossibility of reaching their roots or the os uteri with the finger, were tied by a ligature passed up around them as high as practicable with the double canula. When the vitality of the polypi was destroyed and they were in a

sloughing state they were forcibly drawn out of the vagina with different kinds of forceps and hooks, and their roots divided with a knife or scissors if they had not previously been divided by the ligature. Of these fifteen cases contained in this table not one died. If these fifteen be added to the fifty cases previously reported it will appear that of sixty-five cases of polypus of the uterus which have come under my care, and been operated upon by me, not one has died.

Thirteen of the cases now reported occurred in Burton Ward, St. George's Hospital. For the tabular view of these cases I am indebted to Mr. Smith, late obstetric-assistant, who has filled the office during two years in the most efficient manner.

A Tabular View of Fifteen additional Cases of Uterine Polypi.

	Date.	Name.	Age.	Social condition.	Symptoms and treatment.	Result.
106	October 24th, 1861	Sarah S—, Burton Ward, St. George's Hospital	55	Married; 11 children; 8 miscarriages	Profuse hæmorrhages for twelve months; anæmia; pain in back and hypogastrium; a pyriform tumour, the size of a pea, felt projecting through the os uteri. The ligature applied by means of the double canula on the 29th. No unpleasant symptoms; the tumour came away with the canula on the 31st. Discharged November 5th.	Recovered.
107	January 8th, 1862	Ellen A—, Burton Ward, St. George's Hospital	40	Married; 5 children	Suppression of menstruation, with pink-coloured dis- charge, for ten months; abdomen swollen and tym- panic; mammae rather large and containing milk; bearing-down pains. On examination the os was found open and a smooth body felt at upper part of cervix. She was kept in bed; the discharge ceased, the os uteri closed, and the tumour was never felt again. When last seen (May, 1864) she was quit- well, and catamenia regular.	No operation performed.

108	January 22nd, 1862	Anne H—, St. George's Hospital	39	Married; 8 children; 1 miscarriage	Miscarried four months ago; profuse hæmorrhage for a week, since then bearing-down pains, vomiting, and profuse watery discharge; great pallor and debility; a pyriform tumour, about the size of a large pear, was found projecting through the os uteri. With rest and generous diet her health improved, and on February 22nd a ligature was passed round the root by means of the double canula; urine drawn off for two days. No unpleasant symptoms; on the 24th the polypus and canula came away. Discharged March 12th, still very weak.	Recovered.
109	March 5th, 1862	Anne H—, St. George's Hospital	44	Widow; 1 child	Profuse and frequent menstruation for twelve months; debility; no pain; a small polypus, about the size of a nut, with a small pedicle, felt projecting through the os. An attempt was made on the 12th to pass a ligature round the root, but it was too fine; the tumour was then seized with a pair of forceps and removed by torsion; some pain felt; no hæmorrhage; aching pain in limbs and body for three days; no fever. Discharged April 1st. She is now (October, 1864) perfectly well.	Recovered.
110	March 15th, 1862	Eliza W— St. George's Hospital	43	Married; 2 children	Profuse menstruation for four years; bearing-down pains; great debility; a polypus the size of a large orange felt projecting through os uteri. April 1st the ligature was applied with some difficulty; the ends of the canula were within the os. On the 4th the canula was removed, the ligature left; slight feverish symptoms. The polypus came away on the 7th; it was not fibrous; some parts of it were very hard, cutting like cartilage. Discharged April 21st.	Recovered.

CASES OF UTERINE POLYPI—*continued*.

	Date.	Name.	Age.	Social condition.	Symptoms and treatment.	Result.
111	June 3rd, 1863	Maria K—, Burton Ward, St. George's Hospital	23	Married; 4 children	Confined prematurely a month ago; child putrid; since then profuse hæmorrhage and severe bearing-down pains. Examined June 9th, a large polypus found, soft and irregular; pedicle pretty thick, extending within the os; the pains and discharge ceased. On the 20th the polypus could not be found; the os was somewhat open July 1st; menstruated regularly twice, then became pregnant, and miscarried January, 1864. Examined March 29th; much hæmorrhage; no polypus felt; os nearly closed; anterior part of uterus hard and enlarged.	No operation performed.
112	Sept. 23rd, 1863	Louisa K—, Do.	49	Married; 7 children	Fifteen months ago menstruated profusely, and a small tumour projected from the vagina; pain and irritation in vagina; yellow discharge; catamenia regular; os uteri low down. A round fleshy tumour, about three inches in length, and not so thick as the little finger, projected from the anterior lip through the ostium vaginae, covered with mucous membrane; very vascular and insensible. On the 29th a ligature was applied round it about half an inch from os; aching pain in pelvis and legs for many hours; the tumour and canula came away on 30th. October 13th, anterior lip of os thick; two small excrescences felt on it. Discharged on 15th; still some slight discharge, with smarting pain in vagina.	Recovered.

113	Sept. 30th, 1863	Maria P—, Do.	53	Widow; 5 children	A small polypus removed by torsion five years ago (No. 99); the hæmorrhages soon returned, with much yellow discharge; cutting pains in hypogastrium. A polypus two inches in length, and hardly thicker than whipcord, attached to inside of cervix on left side. On October 10th a good portion removed by forceps; it came away piecemeal; a good deal of hæmorrhage. On the 24th a little more was removed by the forceps. On the 26th rigors; tenderness in abdomen; fever; recovered in about a fortnight. A small portion of polypus still left; the hæmorrhages and discharges did not recur. She was discharged December 2nd.	Relieved.
114	Sept. 30th, 1863	Florence L—, Do.	40	Single	Profuse menstruation for five months; a tumour protruding from vagina for one month; yellow discharge. A small polypus found protruding from ostium vaginæ, oval, not hard; long diameter one and a half inch; surface very vascular; pedicle over two inches in length, quarter of an inch in diameter. A ligature applied on October 3rd; no bad symptoms; polypus and canula came away on 5th. On the 15th discharged cured.	Recovered.
115	October 7th, 1863	Susan C—, Do.	30	Married; 2 children; 5 miscarriages	Profuse and frequent menstruation for eight months; watery discharge; great debility; pain in back; anaemia. In the upper part of vagina a polypus about twice the size of a walnut, irregular shape, firm texture; pedicle short and thick; posterior lip of os uteri hypertrophied. A ligature was passed round the pedicle on the 20th; the catamenia recurred on 22nd; the polypus with canula came away on 23rd; pulse rather quick; no other bad symptom. Discharged November 4th.	Recovered.

CASES OF UTERINE POLYPI—*continued*.

	Date.	Name.	Age.	Social condition.	Symptoms and treatment.	Result.
116	Nov. 18th, 1863	Ellen J—,	32	Married; 1 child	Menstruation painful for three months; pain in sacral region; bearing-down pains; yellow vaginal discharge. On the 28th a small polypus was felt; very thin, hardly an inch in length; no pedicle attached to anterior lip of os uteri within cervix. She was kept in bed; the symptoms disappeared, and on December 12th the polypus could just be felt. On the 26th she was discharged.	No operation performed.
117	January 26th, 1864	Elizabeth E—,	41	Married; 3 children; 7 miscarriages	Catamenia profuse and frequent for four years; many miscarriages; profuse watery discharge; a tumour projecting slightly from between the vulva for six months; pain in back; anæmia. No tumour felt through abdomen, internally; a large tumour was found occupying the pelvis, nearly filling it up; it was about the size of a large foetal head; the finger could be passed readily between it and the vaginal wall all round; at the most dependent part there was a small projection from the main body of the tumour, forming a second tumour; the os uteri could not be felt. On February 9th a ligature was passed round the root of the second tumour; no bad symptoms. On the 11th it came away; on the 16th the ligature was re-applied as high up as the canula could reach and beyond reach of finger; this caused acute pain in left side of uterine region, which lasted for hours; discharge very offensive and profuse. On the 19th the	Recovered.

118	June 1st, 1864	Jane E—	33	Single; 1 child	canulae were removed; the ligature was left applied; the lower part of tumour was sloughing; the ligature came away on 21st; discharge very offensive; slight feverish symptoms; great debility. On the 22nd a considerable portion of the sloughing mass was removed with the forceps, and on the 23rd the whole of it was got away. She rapidly recovered, and was discharged March 9th. She has since been heard from, and is quite well and strong. Menstruation frequent and profuse for two years; thin yellow discharge; slight bearing-down pains; aching pain in back; anæmia. The whole of the pelvis was filled up by a large tumour, larger than a foetal head; the finger can be passed between it and the vagina all round as high as one can reach; the os uteri cannot be felt. The surface of the tumour is smooth, soft externally, hard internally; it has no sensation, and is quite immovable. On July 9th a ligature was passed round the tumour as high up as the canulae would reach. The canulae were removed on 12th; ligature left behind; pulse quick; no pain or fever; discharge very offensive. On the 13th some ineffectual efforts were made to extract the tumour, and again on the 16th. On the 17th the ligature came away, and the polypus was felt rolling about; with considerable difficulty it was extracted by means of the craniotomy forceps. (The tumour was composed of a number of fibrous tumours, oval form, flattened sides, from one and a half to two inches in long diameter, and one inch in short, connected together by areolar tissue.) She rapidly recovered, and was discharged August 8th. She has not been heard from since.	Recovered.
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CASES OF UTERINE POLYPI—*continued*.

	Date.	Name.	Age.	Social condition.	Symptoms and treatment.	Result.
119	May 25th, 1862	Mrs. G—	45	Married; several children	Profuse menstruation during a considerable period; afterwards constant hæmorrhage from the uterus. A polypus the size of a large walnut felt within the os uteri, which was much dilated; no part of the polypus had passed through the os uteri. The hæmorrhage becoming alarming and the polypus not escaping through the os, it was determined to tie it, and the ligature was applied with the double canula without much difficulty. Several days having elapsed before the ligature came away, and the polypus being in a decomposed state, it was resolved to remove the ligature and extract the polypus with the forceps, which was readily done, and the patient recovered in the most favorable manner.	Recovered.
120	June, 1864	Mrs. J—	—	Married; several children	Uterine hæmorrhage; pain in the region of the uterus and rectum, and sense of bearing down; the large polypus in the vagina, which rendered it difficult to reach the os uteri, was supposed by the medical attendant to be the uterus retroverted. The ligature was applied with the double canula, but not without some difficulty; it was tightened daily until the polypus was in a sloughing state, and then it broke. No attempt was made to apply a second ligature; tepid water was injected frequently into the vagina, and in a few days the polypus was extracted with the forceps, and the patient recovered without any unfavorable symptoms.	Recovered.



