

THE
BRITISH AMERICAN JOURNAL
OF
MEDICAL AND PHYSICAL SCIENCE.

Vol. II.]

MONTREAL, MARCH, 1847.

[No. 11

ON OBSTRUCTION OF THE APPENDIX VERMIFORMIS, AND ON "POST MORTEM" APPEARANCES IN PERITONITIS.

By A. F. HOLMES, M.D., Prof. of Medicine, McGill College.

The interesting case of inflammation of the appendix vermiformis, reported by Dr. Nelson in the last number of this Journal, has engaged my attention, for different reasons, one of which is that a case of an analogous nature occurred to myself some years ago, and another, that it serves to establish the appearances which are to be looked for in peritonitis, and thereby to guide our decision in questions of legal medicine. As the subjects alluded to have no particular connexion, they need not be mixed up, but may be considered separately. I shall, therefore, first state (from memory, for I am without notes), the circumstances connected with the very interesting and obscure case to which I have referred, and which was strikingly diverse from that of Mr. S. in the total absence of the intense suffering which characterized the latter; and, then, refer more particularly to the importance of the case of Mr. S., in establishing the nature of the post mortem appearances, which indicate the previous existence of peritoneal inflammation.

CASE.

The subject of the case was a large, healthy, and precocious child, of the age of 20 months. He became indisposed on the night of Thursday (10th March, 1842), being restless and feverish, but not complaining of pain. The next day he was languid and ill, indisposed to exertion, and unwilling to be moved. On the Sunday he appeared better, but on Monday relapsed into a dull, quiescent state, not seeking to leave his bed, disliking the approach of other children, and unwilling to be disturbed, yet without any marked symptom of disorder. He continued without much alteration till Thursday (17th), appearing to have no particular uneasiness, except a feeling of tenesmus, and an inclination to remain a long time at stool. During this time he had taken some doses of mild cathartics. He had made no complaint of pain or griping; there was no swelling of the abdomen; and no pain had been observed to be felt on handling him. On Thursday evening, I was sent for, in consequence

of a sudden change in the symptoms, and on arriving found the child in a state of collapse—his face pale, skin cold, and pulse nearly extinct. The abdomen was free from tension or swelling; there had been no vomiting; and I elicited no sign of uneasiness when I pressed upon it. He had been put into a warm bath before I arrived, and had appeared pleased for a few moments, by slapping the water in a playful manner, but soon let his head fall back as if exhausted. Ammonia and brandy were administered; but he sank rapidly and expired, apparently quite conscious, and uttering his mother's name.

Post Mortem.—On opening the abdomen, the contents, at first view, exhibited nothing anomalous, but upon raising up the small intestines from below, all those portions that lay over the pelvis, or in contact with the cæcum, were seen in a state of intense inflammation, in parts, nearly black from extreme congestion. Endeavouring to discover the cause of this violent circumscribed action, I found the appendix vermiformis in its natural situation, and scarcely changed in colour; but on the left side a small portion was softened and broken down, exhibiting an aperture, the sides of which were quite diffluent. In handling the appendix, which was not enlarged, a hard substance filling its caliber was felt, and upon slitting up the tube, a small concretion, about 3-10ths of an inch long, and 2-10ths of an inch broad, and nearly cylindrical, was turned out. It was of a dull white colour, as if calcareous, and pretty firm, though crushed without difficulty between the finger and thumb. No fecal matter could be detected as having escaped; indeed, the concretion lay between the perforation and the natural opening into the gut.

The preceding case is of so anomalous a character that it may be regarded rather as curious than useful; and the imagination is taxed to give a reasonable interpretation of its phenomena.

The symptoms in the case of Mr. S. were such as we might naturally look for from a highly sensitive part undergoing the intense inflammation antecedent to mortification, but in the other case no indication was afforded of the fatal mischief which was taking place. If permitted to conjecture the course of the disease,