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SOME TUMOURS OF THE INGUINAL REGION SIMULATING HERNIA.*

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The tumours to which reference will be made in this paper are not glandular enlargements or new growths, but tumours caused by the incomplete obliteration of the processus vaginalis, due to an arrest of development, resulting in a connection between the peritoneal cavity and the unobliterated process. This persistent funicular process may contain omentum or simply fluid, the opening of communication being too small for the passage of bowel.

I might remind you that the tubular process of peritoneum which descends with the testicle into the scrotum is freely continuous with the general peritoneal cavity up to the later months of fetal life. At birth the tunica vaginalis enveloping the testicle is all that normally remains of this tubular process, the obliteration first taking place at two points, viz., (1) at the internal ring, and (2) a little above the epididymis; now we have a closed tube and the sac of the tunica vaginalis. The tube shrinks into a fibrous cord and the serous sac enveloping the testicle remains as the tunica vaginalis. Occasionally the tubular process of peritoneum closes only at the lower point and a funicular process of peritoneum remains lying on the cord and continuous with the peritoneal cavity at the internal ring; in such cases bowel may be contained in the process, and this is one form of congenital hernia. But the cases of which I wish to speak are those where the closure at the internal ring commences but the obliteration is not completed. A small opening may be left, too small to admit bowel, but large

* Read by title at the meeting of the Canadian Medical Association, August 28, 1895.