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NOTES ON A RARE CASE OF
BULLET WOUND OF THE
PELVIS, INVOLVING
THE RECTUM.

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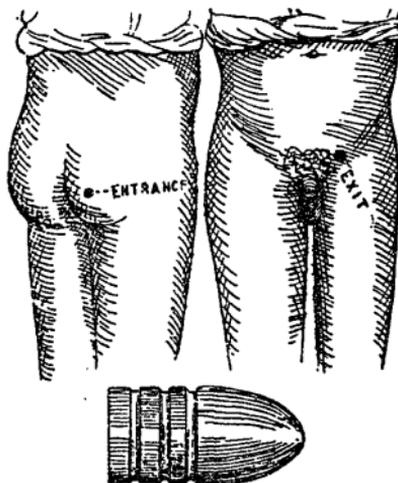
P. J., a married man, aged 21, was admitted into the Princess Alice Memorial Hospital, Eastbourne, under my care, on July 19th last, suffering from a bullet wound of the pelvis and left hand.

It appeared that whilst searching on the sands for a missing tobacco pipe, and taking no particular care where he went, he had wandered ten yards within the line of danger flags, placed behind the rifle butts, at the time the volunteers were practising with the Martini-Henry carbine. He was about 600 yards distant from the firing party, in a line with the butts, and standing at the bottom of a slight declivity; consequently he was out of sight of the marksmen.

Whilst stooping down with his back towards the butts, and his left hand in his trouser pocket, he was struck by a bullet in the right buttock, three inches to the right of the anus, and an inch and a half to the rear of it.

The bullet passed through the great sacro-sciatic notch, through the rectum, at a point about three inches from the anus, then beneath the posterior part of the bladder, and finally out of the pelvis through the obturator foramen

of the opposite side, emerging through the skin at a point one-quarter of an inch to the inner side of the femoral artery. It then passed through the ball of the left thumb, opening the metacarpo-phalangeal joint, thence through the metacarpo-phalangeal joint of the middle finger, the bones of which joint were considerably comminuted, and the soft structures badly lacerated. Hæmorrhage had not been copious.



On admission patient was suffering from shock and loss of blood. Under ether the course taken by the bullet was traced. The wounds of the pelvis differed but little in character. Arterial blood oozed from the wound in the buttock, and venous blood from that in the groin, its margin being surrounded to the width of three inches by venous extravasation. There was no escape of fæcal matter or urine by the wounds. A finger introduced into the rectum detected two large wounds in its walls, at a spot about three inches from the anus; another finger passed through the wound in the groin and down through the obturator foramen, easily met the finger in the wounded rectum. The lower margin of the body of the left pubic