

THE
CANADIAN PRACTITIONER

EDITOR:

ADAM H. WRIGHT, B.A., M.D. Tor.

ASSOCIATE EDITORS:

JAMES F. W. ROSS, M.D. Tor. JOHN CAVEN, B.A., M.D. Tor.

EDMUND E. KING, M.D. Tor.

PUBLISHERS:

THE J. E. BRYANT COMPANY (Limited), 58 BAY STREET.

VOL. XIX.]

MARCH, 1894.

[No. 3

Original Communications.

THE INDICATIONS FOR OPERATION IN SPINAL LESIONS.*

By GEORGE A. PETERS, M.B., F.R.C.S.,

Associate Professor of Surgery and Clinical Surgery, University of Toronto; Surgeon to the Victoria Hospital for Sick Children; Assistant Surgeon, Toronto General Hospital.

FOR the purposes of this paper, I shall define the term "operation" as meaning exposure, by cutting, of the parts involved in or suffering from the effects of the lesion, with a view to relieving the symptoms by removal of the causes upon which they depend. This definition, then, excludes from present consideration such aids to restoration of parts to their normal relations, after injury, as extension and counter-extension, suspension, manipulation, etc.

The operation essentially consists in cutting through the soft parts in or near the central line of the back, and removing the spines and laminæ of the requisite number of vertebræ so as to fully expose the spinal cord and its membranes at the seat of the suspected lesion. This operation, which, as a systematic proceeding, is of comparatively recent date, was at first called "trephining the spine," but is now known by the euphonious and expressive term, "laminectomy." Even in this progressive age, when it is the habit of operating surgeons, securely entrenched behind walls of asepticism and antisepticism, to make light of the effects of even serious

* Read before the Toronto Medical Society, March 1st, 1894.