

THE
CANADIAN PRACTITIONER

FORMERLY "THE CANADIAN JOURNAL OF MEDICAL SCIENCE."

EDITORS:

A. H. WRIGHT, B.A., M.D. Tor., M.R.C.S. England. - J. E. GRAHAM, M.D. Tor., L.R.C.P. London.
W. H. B. AIKINS, M.B. Tor., L.R.C.P. London.

Business Management, - - THE J. E. BRYANT COMPANY (Limited), 58 Bay Street.

TORONTO, NOVEMBER 16, 1889.

Original Communications.

HÆMATOMA OF THE STERNO-
CLEIDO-MASTOID IN
INFANTS.*

BY DR. ALBERT A. MACDONALD.

Though this condition does not give rise to symptoms of any great urgency, it should demand our attention to a greater extent than I believe it does.

The pathology of these so-called tumors of the sterno-mastoid must necessarily be difficult to elucidate, as it is so seldom that opportunities of *post mortem* investigation are offered. Recent publications have, however, made it clear that at least some of these cases occur at parturition, and that the swellings are due to local hæmorrhage into the sheath of the muscle, as the result of injury by traction or pressure. At least three-fourths of the cases have happened in breech presentations, where, doubtless, in order to free the after coming head, undue traction has been made.

The muscles of the semi-asphyxiated infant being flabby and toneless, some portions are probably torn, and blood readily oozes out of the minute vessels, collecting beneath the sheath of the muscle, and giving rise to the blood tumor, which is soft at first, but in the course of a few days, becoming organized, presents the hardened lump which is commonly pointed out

days or even weeks after the birth of the child. During this period I have not noticed any symptoms of urgency, but it is afterwards that the little one has at least a decided appearance of inconvenience and perhaps even of suffering. The right is more commonly affected than the left sterno-mastoid, and the upper than the lower portion of the muscle. Usually the tumor is about the size of a pigeon's egg, and slightly elongated in form.

Sometimes more than one enlargement may appear in the same muscle. It is rare to find both sides affected. In some instances the greater part of the muscle has undergone a change, and it feels enlarged and hard to the touch, somewhat shortened so that the head and face are drawn, giving to the infant the expression so characteristic of wry-neck. Pain is not experienced on pressure, but rather a general inconvenience; whilst the peculiar expression of the child with the presence of the tumor is a source of anxiety to the parents. These cases are more common in the old country than here, and amongst the poorer classes than those who are in more comfortable circumstances. As a rule they recover without treatment, though their disappearance may be accelerated by the exhibition and application of suitable remedies. They commonly last for some months, and for a long time afterwards a hardened cicatrix may be felt in the seat of the tumor. Though I believe, as before mentioned, that in the majority of instances this condition is the result of violence during the process of delivery, I believe

*Abstracts from a paper read before the Toronto Medical Society, Oct. 29, 1889.