

It takes place commonly and readily in veins even after a wound has been opened several times, without any obstruction to the circulation; and all that is requisite in order that it may in like manner take place in arteries is that the circumstances may be similar. Thus it is not retardation of the circulation, nor the quantity of fibrin deposited, that is essential for the cure of an aneurism; but some mode of preventing the impulse of the blood upon the newly-formed adhesions: in other words, apposition and rest. These objects may be attained in various ways. Whether intentionally or not, all the operations for aneurism which have been introduced, since the severer operation of amputation, as recommended by Pott, and that of opening the sac as advised by the older surgeons have been abandoned, tend to favour these conditions. What has been termed the Hunterian operation does so in a marked degree: the coagulum is left undisturbed, and the impulse is taken off the injured vessel. Instrumental compression, which has lately been used with a considerable amount of success, has evidently the same effect. This practice, as old as the time of Hunter, failed at first from the fact that those who attempted it tried to stop the current of the circulation, and thus produced a degree of pain which it was impossible for the patient to bear. With digital pressure the effect is essentially the same, but the degree of compression must necessarily be constantly varying.

The treatment by flexion is a discovery due to Mr. Ernest Hart. The sac, and consequently its contents, are prevented from being distended by being pressed upon in all directions by surrounding structures. The impulse of the blood, by the compression of the tumour against the upper part of the artery, is at the same time diminished.

Thus in all these methods of treatment the same essential conditions are provided for—viz., rest, and apposition more or less direct of the diseased or divided coats of the artery. It is true that cures have been effected in other ways. Thus the coagulum has been rendered so firm by galvanic action, or by the injection of the perchloride of iron, that it has not yielded before the pulse of the heart; and this is to do by artificial means that which is naturally done in animals. And instances where this mode of treatment has been successful does not in the least militate against the necessity of the two conditions upon which I have insisted.

Now, in the various plans of treatment which I have mentioned, we may observe a gradual progress towards the accomplishment of the same end by more simple means. The old operation involving the opening of the sac was succeeded by modifications of the Hunterian operation. This, in many cases, was superseded by various modes of compression; and this again by the less painful and less tedious plan of acute flexion.