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ORIGINAL COMMUNICATIONS.

ART. VI.—Case of Osteocephaloma of Humerus—amputation at shoulder joint—secondary hemorrhage from axillary artery arrested by compression. By Geo. W. Campbell, A. M., M. D., Lecturer on Principles and Practice of Surgery, M'Gill College, Montreal, &c.

R. F., aged 28, from Western Canada, consulted me in September 1851, for a large tumour, which involved the whole circumference of the middle third of the left upper arm. The growth had evidently its origin in the bone, it measured about 15 inches in circumference, its surface was irregular and somewhat knotty, its feel firm over the greater portion of the tumour, with one or two elastic points affording crepitus when pressed upon, and it was not painful to the touch, unless roughly handled; there was no constitutional cachexy, general health good, and appearance robust. The history of the case as given by the patient was, that two years previously, he first observed a weakness in the left arm, accorpanied by slight pain and swelling, the growth of the tumour being very slow for the first year and a half, but much more rapid during the last six months. I recommended the patient to enter the Montreal General Hospital under my care, and a consultation of the Medical Staff of that Institution having been held upon his case—amputation at the shoulder joint was deemed advisable, malignancy of action being suspected in the growth. The operation was performed on the 22nd Septem-The patient was seated in an arm chair, put under the influence of chloroform and the subclavian artery compressed upon the first rib over the clavicle. The arm being held at a right angle to the body, the knife was entered a little internal to the posterior border of the axilla, and transfixing close to the joint, was made to emerge at the unterior border of the deltoid, about an inch below the point of the acromion process, making a large posterior flap by cutting outwards—this stap was raised by an assistant, the arm brought across the chest, the capsule and the insertions of the capsular muscles divided, and the knife being carried through the joint to the inner side of the bone, an anterior