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ORIGINAL COMMUNICATIONS.

ART. XIX.—*Successful Operation for the cure of Occlusion of the Vagina, and a partially successful one for Vesico-Vaginal Fistula in the same patient.* By ROBERT L. MACDONNELL, M. D., Surgeon to St. Patrick's Hospital; Lecturer on Surgery, St. Lawrence School of Medicine, Montreal, &c., &c.

As cases similar to the following are not of common occurrence, I have thought that an account of it would not be uninteresting to the profession:—

A lady, aged 22, was delivered, after a tedious labour of five days duration, of a dead child, two years previous to her consulting me. She recovered slowly, and much inflammation and suppuration of the genitals ensued. She was confined to her bed for nearly a year, and when she had partially regained her strength, she discovered that the orifice of the vagina was closed, and that through a small aperture, about the size of a crow quill, situated about half an inch under the arch of the pubis, the urine flowed whenever she attempted to move, and could be passed through this opening by a spontaneous effort. It was also noticed that the menstrual fluid trickled through this opening at each monthly period. I was consulted by her medical attendant as to the nature of the affection, and the treatment to be pursued, and I advised a gradual dilatation of the orifice by means of waxed bougies, as it appeared to me, that the small orifice was the opening into the obliterated vagina. This practice was persevered in for about a year, when the lady decided on consulting me personally. When she arrived in Montreal, I was absent, and Dr. Hall, who was then visiting my patients, saw her. He found that the orifice had been somewhat dilated, and that the finger could be introduced, for a certain distance, when it came in con-