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WINNIPEG GENERAL HOSPITAL NOTES.

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Two cases of the Furneaux-Jordon's operation for sarcoma of the femur.

CASE 1.—J. V., aged 28, farmer, was admitted to the Winnipeg General Hospital, June 17th, 1890, under Dr. Ferguson, complaining of pain in his right knee and swelling extending up the thigh.

About six years ago, the patient noticed a tender spot upon the inner side of his right knee joint. This gave him considerable trouble at the time and has continued to trouble him at intervals ever since.

During the early part of December, 1889, he experienced a cramp-like pain in his knee which would shoot up the thigh and down into the calf of the leg. This did not completely disable him till March 6th, 1890.

Early in April he noticed considerable swelling of the thigh immediately above the knee joint. The swelling was confined to the outer and anterior part of the femur. It was hard and unyielding but not particularly tender.

Later on the joint itself became swollen and puffy. Since then he has suffered from severe attacks of pain in the lower part of his right thigh but no starting when at rest. The patient is able to bear his weight on the leg without pain, but experiences difficulty in walking from stiffness of the joint. The glands of the groin became enlarged after the application of dry

blisters to the thigh, but these soon subsided.

Since last April he has lost 28 pounds in weight, and at present is emaciated and pale. Cachexia is beginning to show itself decidedly. The skin is dry and warm; eyes dull and heavy; pulse 120, regular and moderately full; respirations, 20; temperature, 100.5° F.; tongue coated, digestive powers good, urine normal.

On examining the right leg the knee joint is found pouched, the patella movable and floating. Fluctuation over the joint is well marked. The thigh is enlarged nearly as high as the trochanter major, the swelling being most marked on the outer and anterior surfaces and about six inches above the joint. The swelling appears to be deep seated, probably connected with the bone. The skin and subcutaneous tissues covering the tumor appear normal and are freely movable over it. The knee is slightly flexed. The patient complains of pain in the thigh, which is dull and aching being worse after exertion. There is tenderness on pressure over the internal and external condyles of the femur; no point of fluctuation over the thigh; no enlarged veins over the tumor. The measurements of the right thigh as compared with those of the left show an increase in circumference of 1½ inches over the patella, also 3 inches directly above the patella 3½ inches at the middle of the thigh and ½ inches at the gluteal fold.

June 18th: The knee joint was aspirated and a considerable quantity of a greenish yellow fluid was withdrawn. This being examined under the microscope showed numerous large and small round uncleated cells. A few drops of bloody serum was also withdrawn from the thigh which contained similar cells. Chloroform was given and an exploratory incision was made down to the bone. The bone was found rough and eaten into by the new growth. Scrapings removed, under the microscope, showed large nucleated round cells contained in a thin fibrous stroma.

June 19: After explaining to the patient the seriousness of his case if left alone and the great danger of a high operation on the thigh, the patient decided to accept