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SCROFULOUS OR TUBERCULOUS GLANDS OF THE NECK *

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The lymphatics of the neck are frequently affected by simple inflammation from cold. They sometimes become sympathetically enlarged from some local irritation; but what are known as scrofulous glands are so intimately connected with tubercle, if, indeed, they are not actually tuberculous, that they demand a separate consideration.

The term scrofulous has never appeared to hold any very definite signification. It certainly cannot, *per se*, be regarded as a positive state of diseased action known or indicated by a certain set of signs and symptoms, but is rather a state of the system generally, a peculiar constitutional condition or diathesis, acquired or inherited, which subjects the individual to the invasion of certain well-marked affections. The term scrofulous, as applied to enlarged lymphatic glands, does not indicate the actual condition of change in the gland structure. It is true that enlarged and caseating glands are constantly met with in persons suffering from what is termed scrofula or struma, but this state of enlargement and alteration in texture has long been recognized as due to or depending on the presence of tubercle. To discuss the history of tubercle would be foreign to my purpose, and would occupy more time than I have at my disposal. First definitely described by Bayle in the early part of this century, various theories and opinions have from time to time appeared. The discovery by Koch in 1882 or '83 of what he

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named the "tubercle bacillus," and which he has demonstrated as existing in all tubercle, has completely revolutioned the views tacitly admitted by pathologists as to the actual nature of this change in the tissues. Koch believes the bacillus to be *materies morbi* of tubercle, so that the views held by Virchow that it requires evidence of the presence of military tubercle in connection with cheesy products to constitute true tuberculosis must be greatly modified, and it is now held that all inflammatory changes, whether in a state of cheesy degeneration or not, if the bacillus of tubercle can be therein demonstrated, must be regarded as tuberculous. While I have confined my observations to tuberculous glands, I must state that there are many other structures which are liable to the invasion of the tubercle bacillus, and which are recognized as properly coming under the heading, not of scrofulous degeneration, but of tubercular infection.

In discussing the subject of the liability of the various tissues and organs of the body to the invasion of tubercle, Volkmann holds that the evidence of tuberculosis depends (1) on its well-known structural appearance, (2) on the presence of the tubercle bacillus, and (3) on the positive results given by experimental inoculation. There is scarcely any texture of the body which is exempt from the invasion of tubercle, and it would seem that the lymphatics are specially open to attack, since their very function, as it were, exposes them to infection. Clinical experience points to the liability of the tissues to this invasion of the bacillus. While this great fact is borne out by every-day observation, it is equally true that a peculiar aptitude or condition of the system must exist to favor the occurrence of the disease known as tuberculosis. We may believe that many, if not all, are occasionally exposed to the influence of the *materies morbi* of Koch, but it would appear that a suitable soil is essentially necessary in which the germ can develop and give rise to the various changes that have been noticed in its wake. To this state of special liability to the invasion of tubercle—to this peculiar diathetic condition the term scrofulous may be applied with some definite signification.

Of all the superficial glands, those of the neck exhibit a special aptitude to the invasion or development of tubercle. The glands of the axillary