

DISEASE OF ATLOXOID ARTICULATION, WITH ULCERATION OF VERTEBRAL ARTERY.*

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THE patient was admitted to the General Hospital, January 5th, 1894. Previous history of the patient not known. She said that for the last ten days she had had sore throat, with difficulty in swallowing, and a little swelling of the left side of the neck.

On examination, temperature $99\frac{1}{2}^{\circ}$, respiration 28, pulse 120. Patient's throat was a little inflamed. The glands were enlarged in the submaxillary region. There was difficulty in swallowing, and pain in neck, but none on motion. Epithelial casts and albumin were present in the urine.

Patient ordered to have poultices applied externally, and a gargle of iron and potash chloride.

January 7. A suspicious membrane appeared on the throat, and patient was isolated. Throat sprayed with hydrogen peroxide. Next day a swelling was seen on the back of the pharynx, on the left side, and was diagnosed as post-pharyngeal abscess. This did not increase in size, and gave no bad symptoms, patient feeling better than before.

January 12. Patient was suddenly seized with severe pain on left side of neck and head, extending upwards and backwards towards occipital region. Was given morphia, which relieved the pain.

Next morning she was again seized with severe pain in the same region. The swelling of the neck was very much increased, and tumor was very tense and seemed to be fluid. Pain lasted only about two hours. Temperature that night, $103\frac{2}{5}^{\circ}$.

January 14. Operation by Dr. Cameron.

An incision about two and one-half inches long was made along the posterior border of the sterno-mastoid. A large quantity of blood clot was scooped out. When the finger was inserted into the wound, it could be pressed back in the cavity opened to nearly the median line. A large hæmorrhage suddenly occurred, and the wound was firmly packed with iodoform gauze, which stopped the bleeding.

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