

THE
MONTREAL MEDICAL JOURNAL.

VOL. XXXVI.

JULY, 1907.

No. 7.

EXCISION OF THE CAECUM FOR CARCINOMA, WITH A
REPORT OF FIVE CASES.

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This procedure was first resorted to with success about twenty years ago, but until the last eight or ten years the number of operations performed were not numerous. The caecum is a part of the alimentary canal which can be easily reached and, for that reason, can be removed with corresponding ease by the surgeon of the present day.

The reported cases, according to a list recently published by Drs. Cumston and Vandever, in the "Annual of Surgery," do not as yet reach one hundred.

The surgical importance of this disease and its complete extirpation is attracting the attention of surgeons, not only for the excellent results which follow complete extirpation, but also in view of the attention that has been drawn to the tubercular and other non-malignant lesions which too closely simulate carcinoma, and which, by virtue of their clearing up after short circuiting operations without complete removal, have done so much to obscure the prognosis of life in these cases.

Moynihan has directed attention to these non-malignant cases, more particularly with regard to those cases of supposed carcinoma of the rectum which have entirely cleared up after performance of inguinal colostomy. It has been the custom to consider these ulcerated growths of the large gut, particularly in the rectum, as being in all cases of syphilitic nature, but in the light of recent minute pathological investigations, it is only too evident that a much more complex explanation will have to be put forward. Apart from the tubercular local lesions of the large gut and those sclerosing conditions which follow long continued ulceration of the colon from dysentery or some such cause, it seems to be an established fact that chronic ulcerative non-specific lesions