

## CASE OF HYSTERECTOMY FOR FIBROID TUMOR OF THE UTERUS: RECOVERY.\*

BY A. LAPHORN-SMITH, M.D.,

Surgeon-in-Chief Samaritan Hospital for Women, Montreal.

Mrs. —, — years of age, consulted me at the Montreal Dispensary for an enlargement of the uterus, which she had noticed only about three months ago. She was a very ill-looking woman. Her skin was sallow, her eyes sunken, her cheeks hollow. She had a heart murmur, a very weak pulse, generally emaciated, albumen in the urine. Altogether she was in such poor condition that when I sent her into the Western Hospital, for removal of the uterus by abdominal section, my house-surgeon telephoned me to come and see her again, as he hardly thought she would stand an anesthetic.

Nevertheless, I decided to operate, for she was having profuse menstruation for the last five years, lasting five days every month, and I felt sure that bad and all as her condition was, it would certainly not be better until the cause of the trouble was removed.

Like other gynecologists who have watched the course of a large number of fibroid tumors, my opinion as to the harmlessness of these tumors has undergone a great change during the last ten years. Formerly we never thought of removing them until they had attained a very large size, and even then we were inclined to delay operative interference from year to year and depend upon medical or electrical treatment, in the hope either of diminishing the hemorrhage or arresting the growth of the tumor, or even of carrying the patient along until the menopause should arrive; but after a time we found that the menopause did not come on at the usual period, but kept up for five, ten, or even fifteen years longer—if the woman lived that long. Moreover, we found that many of the women who had fibroid tumors, even after the flow had stopped, continued to fail in health, generally dying in ten to twenty years before their time from disease of the kidneys, due to pressure of the tumor on the ureters, or from constipation and indigestion, owing either to pressure on the stomach and intestines, or, perhaps, by reflex action, due to irritation of the great sympathetic nerve. Others died from dilatation of the heart, due to defective nutrition, causing dilatation and then failure of the valves to meet, so that the blood regurgitated into the lungs and venous

\*Read before the Medico-Chirurgical Society of Montreal, March 24th, 1905.