

## Progress of Medical Science.

### ON EXTERNAL HÆMORRHOIDS.

A CLINICAL LECTURE DELIVERED AT CHARITY HOSPITAL, N. Y.

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The affection of the rectum to which I shall call your attention to-day, no doubt is the most frequent disease to which this organ is subject, and one which you will constantly meet in daily practice. I allude to hæmorrhoids, or, as they are commonly spoken of, piles. In clinical lectures such as these it will not be my intention to give you a minute description of these affections in all their phases; but I shall touch slightly on some of these points in order that you may better comprehend the nature of the cases that are presented to you, dwelling, however, chiefly upon the more practical points in reference to their surgical treatment. Before presenting to you these patients who are suffering from hæmorrhoids, I must tell you first that all are agreed in dividing piles into two classes—external and internal—and that these tumors are often very different as to their minute anatomy, as well as location, symptoms and indications with respect to treatment. While following this common division of hæmorrhoidal tumors, you must also know that cases present themselves where it may often be difficult to say to which class they belonged, if indeed they could be placed exclusively in either. I am well aware that some authors have laid down rules for your guidance in this respect; but I fear that in your practice you will find many exceptions, which may be of service perhaps only in proving a rule. While these two varieties are very commonly met with in the same individual, you are often to see them separate and distinct. More frequently you will observe external hæmorrhoids unassociated with internal, than internal without the presence also of external. Indeed it would be a rare case, were it of any duration, to find the internal variety devoid of some external growth.

Now, where are we to look for these different varieties of this affection? External hæmorrhoids are those which are seen just at the verge of the anus, and for the most part form just at the lower border of the sphincter, and project outside the verge of the anus. Internal, those that form above the sphincter, and remain either in this locality, hidden from casual observation; or from various causes they too may project outside the external sphincter. Bear in mind it is the situation in which these tumors first arise, not the locality in which the eye may at first perceive them, that places them under one classification or the other. This being the case, are there any reasons why they should

arise just at these situations, and not within that portion of the bowel which is surrounded by the circular muscular band which we call the sphincter? The solution of this question, I think, was given by Mr. Brodie, and is to be found in this fact: the hæmorrhoid veins, which is the part chiefly involved in this affection, run on the inside of the sphincter, and while this muscle preserves its tone, dilatation of these vessels is not permitted. It will be only in old standing cases, I think, that a varicose condition of these vessels will here be found.

Before speaking of the causes that give rise to hæmorrhoids, it is perhaps better to consider the nature of these tumors. Though I shall tell you presently that we classify these growths as to their appearances and pathological tendencies, as well as the locality in which they arise, we may say that no matter whether they be called external or internal hæmorrhoids, they are made up chiefly of a varicose condition of the hæmorrhoidal veins, though sooner or later other elements enter into their formation, such as capillaries, arteries, products of inflammation and integument, according to the particular kind of tumor which we meet with. And here it may be well to unenumerate a few of the appearances these tumors present, and the respective characters of each.

First, as to those which are spoken of as external hæmorrhoids. If you examine the anus of a patient with this form of trouble, as for example in the case of this man before you you will find around the verge of his anus several tumors varying in size from that of a large pea to those of the size of a Lima bean, and in many instances these may be of a much larger growth. Their bases are large, and by separating the sides of the anus, either by the fingers or speculum, you will observe that they run up the sides of the bowel somewhat like pillars. The extent they ascend will vary much in different cases. Some of these tumors are seen to be quite distinct from others, while, again, others merge into one another. The color of these growths is of a bluish appearance at their most dependent portion, a little more of a purple color above, and they may be covered by both mucous membrane and the thin integument which surrounds the anus. This will present to you a fair case of what is known as external piles. In other instances, as with this patient, you will also observe surrounding and hanging from the anus several tags of thickened hypertrophied integument. Some would place these patients in two separate classes of external piles; but I think that this is a useless refinement, regarding, as I do, that these patients exhibit but two stages of what is known as external hæmorrhoids. For let a patient who suffers from varicose external hæmorrhoidal veins neglect himself, then hypertrophies of the integument surrounding the anus will sooner or later be developed. This variety of hæmor-