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ACUTE INTESTINAL STRANGULATION, WITH REPORT OF TWO CASES.*

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We are all fond of reporting our successful operations at meetings of this kind. Our unsuccessful ones are not very frequently heard of. Perhaps it would not be out of place to break this monotony by reporting two unsuccessful cases of acute intestinal obstruction I had in my practice last summer. We often learn more by our failures than by our successes.

Let me suppose that a person is taken ill with acute intestinal obstruction. He presents the following symptoms :

While in the enjoyment of perfect health he is suddenly seized with intense colicky pain in the abdomen. The pain may be so severe that he is doubled up and rolling on the floor in agony. The pain may be constant, but is liable to periodic exacerbation. This is the case when the occlusion of the gut is complete; or it may be intermittent, in which case the obstruction is partial. Constipation is, as a rule, absolute. In the course of three or four hours he is taken ill with copious vomiting. The vomited material is composed of ingesta at first, but it soon assumes a bilious character, and in a short time it becomes stercoraceous. This is followed by intense nausea, which is unrelieved by the act of vomiting. Tenesmus is absent. There is as a rule severe prostration.

Symptoms such as these may depend upon the following different forms of acute intestinal strangulation, viz. :—1st, strangulation by

* Read at meeting of Nova Scotia Branch, British Medical Association, Jan. 28, 1898.