

THE
MONTREAL MEDICAL JOURNAL.

VOL. XXIII.

JANUARY, 1895.

No. 7.

Original Communications.

END TO END ANASTOMOSIS OF INTESTINES BY
MEANS OF THE MURPHY BUTTON.

By JAMES BELL, M.D.,

Surgeon to the Royal Victoria Hospital; Consulting Surgeon Montreal General Hospital; Professor of Clinical Surgery McGill University.

I am able to report three cases in which I have used the Murphy button to secure end to end union of intestine after resection. In two the results were completely successful and most satisfactory. In one thus made there was non-union, sloughing of the apposed ends of the bowel, escape of contents and death from peritonitis. Two of the three operations were upon the same patient, and it was the second operation upon this patient which proved fatal. I am, therefore, enabled to present specimens showing (1) the union which had resulted from the first operation, as well as (2) the sloughing of the bowel which resulted from the second operation. This case is, moreover, a most interesting and puzzling one from a pathological standpoint, although I wish for the present to direct attention specially to the use of the Murphy button.

The second case was one of femoral hernia, in which 39 hours of strangulation had produced complete gangrene of the extruded loop of bowel. Until very recently such cases were the *bête noir* of the surgeon, and the question,

* Read before the Montreal Medico-Surgical Society, November 30th, 1894.