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Criticism and News.**

For Communications solicited on all Medical and Scientific subjects, and also Reports of Cases occurring in practice. Advertisements inserted on the most liberal terms. All Letters and Communications to be addressed to the "Editor Canada Lancet, Toronto."

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HEMORRHOIDS.

There has been a great deal written of late regarding the proper treatment of piles, with little or no reference, however, to the kind of piles referred to. One writer suggests the treatment of piles by the use of the ligature, and another by the employment of the hypodermic needle, another by the clamp and cautery, etc. Writers should be more careful, when speaking of the treatment of piles, to specify the nature, pathology, and situation of the tumefaction under consideration. Any suggestion on the treatment of piles, without a proper understanding of its character, only serves to confuse.

The curative treatment of external piles is to lay them open and turn out the clot, or snip them off, and cauterize if bleeding occurs to any extent. Provided the pedicle is large and indistinct, the incision is the better treatment. After the blood has disappeared in the tumor, it may either be snipped off, or left alone if it is harmless.

An internal pile first makes its appearance in the form of a thickened, hard mass, with a granular surface, which is covered by a thin membrane, often breaking down and causing a gush of blood from the dilated capillaries. In this stage of the disease, the best treatment is to dilate the sphincter and apply nitric acid to the granular surface; a wire speculum being used to dilate, in order that a proper application of the nitric acid can be made. After this condition of the hemorrhoid exists for a

longer or shorter time without cure, it gradually forms into a distinct tumor, the mucous membrane becomes thickened, the bleeding ceases, the connective tissue is increased, the capillaries are finally closed, the tumor enlarges, and a more or less tumor-like mass results, which may finally protrude through the sphincter in straining at stool. In this tumor the capillaries are in a manner obliterated—the mucous membrane, arteries, veins, and connective tissue, forming the tumor. The result of these tumors protruding through the spincter is well understood, and also the palliative treatment.

The curative treatment of this form of internal piles should vary with the appearance of the tumor. Provided the tumor is not very large and prominent, and is attached to a broad base of the mucous membrane, the injection of different fluids will afford certain and permanent relief. The injection is intended to reduce the tumor by setting up a slight inflammation, resulting in a gradual shrinking of the tumor, or cause it to slough, which is rare. Probably the best injection in use, and one that gives the least pain, is glycerine, water, and carbolic acid. This may be used in any proportion, but that which we prefer is six parts each of glycerine and water to one of carbolic acid. This solution may require many repetitions, but it gives little or no pain, and does not prevent the patient from attending to his ordinary duties. The injection is made with a common hypodermic syringe, the needle being thrust well into the tumor. The injection may be made every five or six days till the tumor disappears. In our hands the hypodermic plan of treatment has been the least objectionable to the patient, and the most satisfactory to us in selected cases.

The operation by means of the ecraseur, or clamp and cautery, is quite safe, so far as the immediate and curative results are concerned, but it will often leave a cicatrix that may subsequently give trouble; hence we do not practice it. The ligature treatment is probably more satisfactory than any other in the majority of well-defined hemorrhoidal tumors. It leaves little cicatrix, and gives permanent relief. The patient should be anæsthetized, placed in the lithotomy position, and the sphincter thoroughly but gently dilated with the fingers till its contractile power is completely lost. The tumor is then easily drawn down with a