

Original Communications.

MONTREAL GENERAL HOSPITAL.

Popliteal Aneurism. (Under the care of Dr. WILKINS.)

Michael McCormac, aged 28, laborer, was admitted into Hospital under Dr. Wilkins' care, on the 9th of August, 1877, suffering from aneurism in the right popliteal space. Patient is well-built, about 5 feet 6 inches in height, and has the appearance of enjoying very good health. He says he was never ill excepting a slight attack of intermittent fever he had about three years ago. He has, however, a scar in his right groin. About eleven years ago he had an ulcer on the glands penis, involving the frenum, which it subsequently perforated, and which perforation is still patent. Before the ulcer healed he had a suppurating bubo in the right inguinal region which he had had opened. He says he never had an eruption of any sort on his skin, nor had he ever suffered from sore throat. There are no enlarged glands nor other evidences pointing to the ulcer and accompanying bubo being other than chancroid.

About six months ago he first complained of an uneasy sensation in his right leg, and of fatigue after slight exertions, still, he continued to work for about two months longer, when he was obliged to desist. At about this time (that is four months ago,) his foot and leg commenced to swell and become painful. For the first time, about two months previous to entering Hospital, he first noticed "throbbing" under the knee, although it had been painful for about a month previously.

Upon admission into Hospital a pulsating tumor about the size of a hen's egg was felt in the right popliteal space. At each pulsation, fingers placed one on each side of the tumor diverged considerably and with a strong impulse. A thrill was distinctly felt, but no bruit could be heard. This knee measured one inch more in circumference than the other.

As the case was considered a favorable one to try the method of cure by Esmarch's bandage, first recommended by Dr. Walter Reid of the Royal Naval Hospital, Plymouth, and subsequently by Mr. Wagstaffe of St. Thomas' Hospital, it was decided to make the attempt.

On the fifteenth of August an ordinary roller

bandage was tightly applied over foot and leg, as far as the lower border of the popliteal space, then loosely over this space, commencing to roll again tightly just above the tumor, carrying the bandage as high up as the junction of the upper and middle thirds of the thigh; a strong elastic ligature was now tightly applied, entirely cutting off the supply of blood to the parts beyond. The bandage and ligature were both left on for exactly one hour; of course during that time there was no pulsation whatever in the tumor. A hypodermic injection of one-third of a grain of morphia was administered. About a quarter of an hour after the application of the bandage and elastic ligature, he commenced to suffer pain, which in a very few minutes became almost intolerable, so much so that a second injection of the same quantity of morphia was administered, after which he still continued to suffer intensely. At the expiration of the hour both bandage and ligature were removed, when the tumor was still found to pulsate, although it was slightly diminished in size.

Fearing that the want of success of this attempt to cure might have been due to the application of too great a pressure directly over the tumor, squeezing some, if not all, of the blood out of it, and consequently not allowing a coagulum to form to the full size of the aneurismal portion of the vessel, instead of imprisoning it there and thus forcing coagulation, it was decided to make another attempt.

August 17th. Instead of using cotton roller, as on the previous occasion, elastic bandage was firmly applied from the toes up to the lower border of the popliteal space. Over this space, a thin layer of cotton wool was placed, as recommended by Mr. Wagstaffe, and the bandage lightly applied, commencing again to apply it tightly immediately above the tumor, up to within about four inches of Poupert's ligament. The elastic ligature was tightly applied, and both bandage and ligature kept on for seventy minutes. As on the previous occasion he very soon commenced to suffer intensely, especially from the elastic ligature. A hypodermic injection of half a grain of morphia was given as soon as the ligature was applied, but the pain became so excruciating that for about the last twenty minutes he was kept under the influence of chloroform. On removing the bandage and ligature, the tumour was still found to pulsate.