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**ON THREE CASES OF PERFORATING TYPHOID ULCER
SUCCESSFULLY OPERATED ON.***

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Not very long ago, when a case of perforation of a typhoid ulcer occurred, it was looked upon as hopeless. With the general advance of abdominal surgery attempts were made to close the ulcer by operation. It was thought by many, however, that such attempts were liable to prove futile, because of the usual condition of collapse of the patient in such cases, and the little reparative power which existed, owing to the violence of the disease. It was argued that the operation by itself was a serious one, and with a severe fever superadded there was but little chance of a successful result. However, operations were still performed, and physicians soon recognized the fact that the earlier the operation took place, after perforation, the better; so the surgeon was called in as soon as the perforation could be definitely diagnosed. Now, from time to time, a successful case was reported, and, thus encouraged, more operations were undertaken, and at the earliest possible moment.

My colleagues at the Montreal General Hospital soon recognized that the surgeon should be called in as soon as possible after perforation, with the result that a fair percentage of recoveries was obtained. In some few cases a mistaken diagnosis was made and no perforation found, but no harm resulted to the patients. These mistakes are inevitable in early operations, but are much counterbalanced by the re-

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