

Selections.

The Surgeon's Responsibility for Post-operative Conditions.

It is difficult for a physician to clearly express the views which follow without seeming to reflect upon the skill, courage, and training of the surgeon. Such is not the intention of the present article, but it is written because we believe that statistics in regard to operative recoveries produce erroneous conclusions as to the value of the operation itself in many instances. We are, of course, aware of the fact that, under certain circumstances an operation is imperatively needed, and must be performed, be the result what it may, in an effort to save life; and no can be beyond the writer in his admiration of the skill and bravery with which surgeons operate at such times. There are, however, a certain number of cases in which operations are performed for the relief of conditions which are not sufficiently pressing to endanger life, but which may be productive of very considerable annoyance, discomfort and pain. Not infrequently the condition is one which renders the patient willing to submit to an operation, and she relies upon the superior judgment of her physician to determine the degree of relief which she will obtain as a result of the operative ordeal. In some instances much relief follows. But it has been our experience that in a certain number of cases what might be called "substitution symptoms" are developed, so that the patient's condition, while relieved in one direction, is made worse in another, and therefore the operation is of no material benefit to her. Probably most physicians of experience will agree with the writer in the statement that a very large number of women who have been subjected to abdominal section for various causes are more or less invalids for the rest of their days, and regard the operation as having been a failure, not because the particular trouble for which the operation was performed has not been relieved, but by reason of the development of associated symptoms which made their lives as unbearable as before. Thus, we have in mind at the present time the case of a woman from another city, who was operated upon because she had a chronic inflammation of her Fallopian tubes which gave her much discomfort and pain, but was not severe enough in any way to jeopardize her life. So far as the operation was concerned, recovery was rapid and complete. But so far as her general condition is concerned, she is now worse than before. The pelvic pain after the operation was worse than before it was performed, and finally became so severe that a second abdominal section was carried out, with the result that the surgeon told her that he had "found and removed a buried unabsorbed ligature," but although she passed through this second operation successfully, she is still suffering as much pain