

THE CANADA LANCET:

A MONTHLY JOURNAL OF

MEDICAL AND SURGICAL SCIENCE.

VOL. VI. TORONTO, MARCH, 1874. No. 7.

Original Communications.

INJURY OF BRAIN WITH PARTIAL INSSENSIBILITY AND APHASIA LASTING 18 DAYS—RECOVERY.

BY J. H. MCKAY, M.D., L.R.C.P., AND L.R.C.S., EDIN.
TRURO, N.S.

I was called on the 10th of June last to attend a young man named Skinner, a brakeman on the Intercolonial Railway. While standing on the last car leaning out and holding on by one hand, he by some means lost his hold and fell, striking on his left temple, the train at the time going at the rate of twenty-five miles an hour.

I saw him half an hour after the injury. He presented the following symptoms: A large swelling about the size of a hen's egg on the left temple about 1½ inches above the superciliary ridge. The skin was unbroken, showing that he must have fallen on a flat surface. On examination I found this swelling to contain liquid blood, surrounded by a hard rim, giving a feeling that might be easily mistaken for fracture, but no distinct fracture could be detected on closer examination. I understood from those who picked him up that respiration was suspended for a short time. When I saw him, which was about half an hour after the accident, the breathing was regular but not stertorous. Pulse about eighty full and compressible. Eyes firmly closed and turning from side to side, pupils dilated and slightly sensitive to light. With these symptoms there was restlessness to a very great degree, constant motion of the limbs not in any particular direction, but giving one the idea that something was in contact with him that caused him pain which he endeavored ineffectually to remove. All the usual restoratives were applied without effect. I removed him to Truro, a distance of four miles without any change in his symptoms except having

several times vomited, which gave me hope that consciousness would soon return. On removal to his residence I again examined carefully the seat of injury and thought I detected slight depression of the skull. General symptoms continued the same throughout the evening. Ordered him a powerful cathartic, cold applications in the meantime having been kept constantly to the head. No change during night; was quiet at short intervals as if in sleep, the remainder of the time tossing from side to side. Purgative repeated on following morning without effect.

I then in company with Dr. Fraser of New Glasgow gave him an enema composed of half-a-pint of warm water with a table-spoonful of turpentine, at the same time giving him three drop doses of croton-oil in a tea-spoonful of olive oil, repeating every two hours until a free evacuation from the bowels was induced, without any sign of returning consciousness. After consultation we decided that on the following morning we should make an exploratory incision, and be guided by circumstances for the rest. We accordingly did so, laying open the skin for about three or four inches over the seat of injury sufficient for a free exploration; after turning out some clotted blood, we could on strict examination detect no fracture, but there appeared to be slight depression. Under such circumstances we did not deem it our duty to go any further and brought the edges of the wound together by means of sutures. The opinion we then formed of the cause of the continuance of the symptoms and which we think was afterwards in a manner verified, was that compression was caused chiefly by extravasated blood, and also in a slighter degree by depressed skull. During the time of the operation he struggled in the same manner as in the first few hours after the injury. There was evident sensibility to pain although there were no other signs of returning consciousness. This brings us to the fourth day, and during all this time the eyes remained closed; pupils slightly dilated and partially insensible to light; breathing natural. I then shaved the back part of the head, and applied a fly blister, extending from ear to ear without any apparent effect. The diet during all this time was limited to a little gruel, milk, and beef tea, of which he took considerable quantities; the swallowing remained quite good. On the sixth day after dressing the blister and having his linen changed, he showed