THE CANADA LANCET.

VOL. XXVIII.

TORONTO, FEBRUARY, 1886.

No. 6.

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SIX YEARS' EXPERIENCE IN ABDOMINAL AND PELVIC SURGERY.*

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The accompanying list which is now presented to the Society contains all my abdominal sections, without any reservation whatever, with the name and age and address of the patient with the disease for which the operation was performed, the nature of the operation and the immediate and remote results, as well as the date and place of operation.

They have all been performed during the last six years, previous to which time I sent all cases requiring operation to more experienced surgeons. It was only after I had been in general practice for sixteen years that I began to feel justified in undertaking so serious a responsibility myself. Up to the 20th November, 1895, the time of writing this, I have performed 143 abdominal sections, with 11 deaths, at the following places:

Private Hospital;	67,	with	5	deaths,	or 7 %.	
Western	42,		4	11	9%.	
Samaritan II	24,	11	1		" 4%.	
Strong's "	2,		0	п		
Private houses;	8,	п	1	п	,,12 % .	
Total, 143 sections, with 11 deaths, or $7\frac{1}{2}$ %.						

They were performed in the following years :

In 1890, 4 operations, with 0 deaths.

In 1891, 8			1	. n	or 12 %.
In 1892, 12			2	' n	" 17 %.
In 1893, 23	н	н	3		n 13 %.
In 1894, 39	н	11	3	11	ıı 8%.
In 1895, 57	11	н	2	н	" 3½%.

* Read before the Medico-Chirurgical Society, Montreal, 29th November, 1895. These 143 cases were operated on for the following reasons and with the following mortality:

Removal of large tumors of the kidney by abdominal section, 2; no death.

Extra-uterine pregnancy, 3; no death.

Large ovarian tumors, 8; 1 death.

Abdominal hysterectomy, 11; 3 deaths.

Ventral hernia, 7; no death.

Obstruction of the bowels of nine days' standing, 2; 2 deaths.

General peritonitis, following miscarriage, 1; 1 death.

General tubercular peritonitis, 2; no death.

Cancer of both ovaries, 1; no death.

Puerperal septicæmia, 1; no death.

Ruptured pus-tube, 1; no death.

Trenholme's operation, or removal of appendages for fibroid tumor, 4; no death.

Pus-tubes, 42; 3 deaths.

Cystic ovaries and chronically inflamed tubes, 9; 1 death.

Hydrosalpinx, 6; no death.

Ventrofixation, including in some cases curetting and repair of lacerated cervix and perineum and removal of diseased ovaries and tubes, 43; no deaths.

Making a total of 143 cases, with 11 deaths.

Having stated when and where these operations were performed and how many recovered and how many died, I would like to point out that the death rate in 1892 and 1893, of 17 and 13 respectively, was larger than it should have been, owing to my having operated on women

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