AN OBSCURE CASE OF POPLITEAL ANEURISM WHICH SIMULATED SARCOMA.

By FRANCIS J. SHEPHERD, M.D., C.M.,
Professor of Anatomy McGill University; Surgeon to the Montreal General Hospital.¹

W. H., aged 46, carpenter, entered the Montreal General Hospital Dec. 31, 1883, suffering from a large ulcer of the right leg, and a tumor of the lower and back part of the right thigh. Previous to 1875, his health had been always good, no history of syphilis or rheumatism, but has had frequent attacks of gonorrhoea. Has been intemperate since boyhood. For three years was a soldier in the British army. In the autumn of 1875, was treated in the Montreal General Hospital for double popliteal aneurism.2 The aneurism of the left popliteal was treated by digital compression, and that of the right by Carte's compressors. After remaining in hospital two months, he was discharged cured. He says that he kept well for two years, then the small hard lump which had remained in his right popliteal space began to enlarge and pulsate, and was again cured by compression. For the next four or five years he was not troubled with his aneurisms, but about a year and a half ago noticed a small tumor in the right popliteal space; this tumor was hard, firm, and did not pulsate; it gradually increased in size, and when he was in hospital a year ago for treatment of the ulcer on his right leg it was noted as being about the size of a man's fist, fixed, hard, and without pulsation. From this time the tumor increased more rapidly.

The following is the surgical reporter's account of his condition on entrance: "On examining the affected leg a huge indolent ulcer is seen on the lower and outer side; there is also a large tumor, nearly the size of a man's head, on the back of the thigh; it extends from the popliteal space to the middle of the ham, and is somewhat egg-shaped. The measurement of the thigh a little above the knee, the point where the

¹ Read before the Canada Medical Association, Aug. 1884.

² Au account of his case is published in the Canada Med. and Surg. Journ., vol. i. p. 298.