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THE SOFT MYOMA.*

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Knowing full well that your election for this post of honor is not so much due to my own merit, as to the fortunate association with my beloved master, Lawson Tait, also having heard of your deep interest, not only in the practical, but in the abstruse sides of our science, I have decided to bring you a part of the work in which he and I were interested, but which to many societies of general practitioners would prove an insufferable bore; so that if any of you become fatigued with these physiological studies of the uterus, he must lay their infliction at the door of madame rumor, and not charge them up to me, as a sample of deliberate pedantry.

The subject, of which I wish to give only the natural history, is that of the "Soft Myoma," but please remember that I exclude all forms of sarcoma and carcinoma, and speak only of the soft benign growth of the uterus. Those of you who have kept up with the history of this subject, know that until a few years ago this form of uterine tumor was thought to be merely one of the secondary changes of the hard myoma, and that it was believed to be due entirely to a degeneration of the newly-formed muscular fabric which composes the ordinary fibroid so familiar to us all. A few years ago, however, this began to be doubted by some authorities, and what I will now attempt, is to bring forward proof, that from its very inception, it is an entirely distinct tumor, springing from a very different source, having separate histological and clinical histories throughout its course and widely differing terminations.

*Read before the meeting of the Ontario Medical Association, Toronto, June, 1888.

As has been proved, long ago, the hard myoma is an homologous tumor of the uterine wall; the soft myoma being considered a totally heterologous condition; but what I now expect to prove is, that it is not a foreign tissue to the uterine body, but merely an homologous growth of the uterine lining.

That you may understand more thoroughly what my idea of this uterine lining is, I must refer somewhat at length to some papers, all of which form links in a chain, of which this article is only a part.

In August, 1881, I published a paper in the *New York Archives of Medicine*, on the "Origin of the Blood Globules." It was the result of a series of studies of the spleen, the tonsil, thymus and lymphatic glands, as well as the other adenoid structures, which are located along the alimentary canal. In making these studies, I believe I was the first to use the high power immersion glass in studying a development, which I then, for the first time, found going on in the ultimate fibres which compose these tissues.

Throughout them all, I found a new method of cell production—that is, by a process of growth of the minute clots within the fibre. The forming corpuscle bulges out from the thread-like matrix, increases its bulk and richness of granulation, until it finally separates from the parent thread, a fully grown lymph corpuscle. Though I sought carefully for months at that time, and I can now say the same as to years, I have never seen a lymph corpuscle bifurcate, except in an inflamed organ. By this means I sought to establish the fact, that in the adenoid tissues with this special method of development, was stored up material, from which corpuscular supply was constantly replenished, and that on their exhaustion, as is found in extreme old age, depends the senile atrophies, and many of the other wasting conditions of the aged.

Two years and a half ago, while doing Mr. Tait's pathological work, I saw for the first time a healthy specimen of the corporeal endometrium. You can imagine my surprise when I found it to be very closely related to my old friends of the adenoid group. Studying it faithfully, I tried hard to reconcile its condition to the then recognised theories about menstruation. Like all the rest of the world, I had been carried away by the doctrines in regard to the variations in blood pressure,