

CASE OF INTUSSUSCEPTION.

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Having had a case of intussusception lately for the relief of which abdominal section was performed (though with a fatal result), I thought a short report might prove interesting. The patient was a male infant aged 7 months, naturally very pale, though well nourished and had never previously been ill. He began to suffer from nausea and vomiting on Sunday afternoon, July 11th, followed during the night with alvine evacuations which soon became sanguineous and attended with some tenesmus. At noon on the 12th a tumor was observed in the left lumbar region, moveable and not very tender, which with the cessation in great measure of the discharges from the bowels, and the appearance of a small quantity of blood, following the expulsion of some milk used for injection, amply confirmed the diagnosis of intussusception. Having so far failed to afford any relief by ordinary measures, I procured the assistance of Dr. J. D. Kellock, of Perth, and after a further persevering and useless attempt by means of injections of various fluids and of air, to remove the trouble, we finally decided on attempting abdominal section, on Tuesday morning, 13th; the parents being willing that anything affording even a chance of relief should be done.

The child having been placed under chloroform an incision was made in the median line between the umbilicus and pubes, and on opening the abdominal cavity, a portion of distended intestine escaped, causing some trouble in securing the affected part, which when found was seen to consist of an invagination of the small into the large intestine beginning at the ilio-cæcal valve which had passed through the ascending transverse, and descending colon. The bowel was considerably congested for some distance above the seat of invagination, which we found very difficult to unravel on account of being firmly impacted, and the danger of injuring by manipulation, the congested and consequently friable peritoneal covering of the bowel. We were so long delayed at this point as to materially add to the probability of a fatal termination of the case.

Having had the privilege of witnessing Mr. Hutchinson at the London Hospital perform his

successful operation and noticed the facility with which the invagination was reduced in his case, we did not anticipate so much trouble and delay in effecting reduction, which, however, we finally accomplished and having replaced the intestine within the abdomen, closed the wound with hare-lip pins and suture, secured with a pad and bandage. The child recovered perfectly from the chloroform and nursed a little, but never reacted, and died about three hours after the operation, which though unsuccessful, demonstrated the futility of any other method of treatment.

Correspondence.

To the Editor of the CANADA LANCET.

SIR,—The following case may be of interest to your readers, as illustrating the resistive action of the tissues sometimes, against foreign bodies.

M. C., æt. 9; two years ago fell over a wood-pile, a splinter entering the left cheek one inch below the margin of the lower eye-lid, just above the malar process. His sister, immediately after the accident, withdrew the splinter, and as it required considerable force in its extraction, she imagined the whole of it had been removed. Little or no irritation followed; the wound healing slowly, finally closed. Shortly after, another opening formed, one inch below the former, and continued to discharge a small quantity of thin, serous matter. There was no swelling, pain or fetid discharge, indicative of bone disease, at any time.

At this stage it appears to have proved obstinate, a large number of professional and domestic remedies having been employed to heal the sinus. By the aid of a probe, and making firm pressure, I discovered what appeared to be the sharp point of a sequestrum. After several unsuccessful attempts to extract the supposed portion of bone, I succeeded in withdrawing a splinter of wood one inch in length and about the diameter of an ordinary lead pencil. The splinter had evidently lodged in the malar process; but that it should remain there for two years without setting up more irritation, is rather remarkable.

Yours respectfully,

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