

*The Removal of a Foreign Body after Twenty-Five years presence beneath the Skin of the Upper Arm.* By G. P. GIRDWOOD, M.D., M.R.C.S.E., late assistant-surgeon 1st Battalion, Grenadier Guards.

Mr. W——, whose wife I was attending at the time, casually asked me one day whether it was a painful operation to remove a splinter from under the skin of the arm. I replied not. He then said that twenty-five years ago, as a child, he fell whilst playing on an old waggon in his native place, and ran a splinter of wood into his right arm, on the inner side, immediately over the centre of the course of the brachial artery, when it was broken off in the arm. A small portion was removed at the time, but the other and much larger portion remained behind, and the wound healed over it. He said he would consider about having it removed, and nothing was done at that time. A few days afterwards, a friend caught him by the arm and gave him a squeeze, and apparently forced the one end of the splinter through the skin. When I saw him again it was to ask me to remove the splinter. On examination, I found a small tumour just beneath the skin in the position already mentioned, about one inch and a quarter long, and half an inch wide, the long axis being across the artery. Over the centre of this tumour was a small abrasion of the skin nearly healed up. The splinter was readily removed by a small incision across the one end, and drawing it out with a pair of forceps.

There is nothing in the operation that makes this case worthy of record. It is, however, an interesting fact, that a fragment of wood, a little more than an inch in length and half an inch wide and three-eighths of an inch thick should remain embedded in the tissues for a period of twenty-five years. Bullets, metallic ligatures, and sutures we know, will remain for years without giving any trouble unless they are pressing on some nerve or artery, but it is not often we have the opportunity of seeing fragments of organic matters being so embedded. In this case no discomfort was experienced until an accidental pressure caused a protrusion of one end through the skin. To avoid a recurrence of such an accident, my patient determined to have the splinter removed.