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MYOMA OF THE UTERUS.\*

BY DR. F. R. ECCLES, LONDON, ONT.

The subject of myoma of the uterus has been engaging the mind of both the general practitioner and the specialist for the last decade as it never has in all the great years of the past. The restless spirit of man, in all departments of science, is pushing forward rapidly, and opening up paths never before trodden, and the department of medicine forms no exception. Some of these paths, during the last decade of the nineteenth century, will be well beaten, and some, no doubt, closed. At one time, and within the recollection of some here, the treatment of ovarian tumors by removal through an abdominal opening caused so much adverse criticism, and was attended by such untoward results, that what is now a well-beaten path might have been closed for half a century to come. Just at that time details of cases were noted and statistics kept in a more methodical manner than had ever been before; the result of which was a more rapid ripening of experience, largely beneficial to those just engaging in abdominal work. And so we find the differential diagnosis and treatment of myoma have been largely engaging the mind of the profession, since with the ripened experience of many operators the results of ovariectomy have been so encouraging, so successful.

Time will not allow me to enter largely into the diagnosis, and I have considerably curtailed what I had intended to say on this point in order to especially provoke discussion on the treatment. A time occasionally arises in those cases when symptoms which are common to many diseases must receive their due import, and the general practitioner, as well as the specialist, may here, right in connection with this subject, find it no small matter to determine to which of its many sources a particular sign or symptom is due. Hemorrhage is the most frequent symptom of myoma, but it is a symptom common to many other diseases, and a knowledge of *such* is absolutely necessary in order to determine the most likely cause of hemorrhage from the uterus in any given case. I do not think there is any branch of medicine to which these remarks are more applicable, any branch in which greater care is necessary in estimating the proper value of symptoms and history, than in the physiological and pathological processes which produce enlargement of the abdomen. It is to the general practitioner we look for the history and treatment of the great majority of cases of myoma of the uterus. They are first brought to the notice of the family physician by reason, perhaps, of a swelling having been discovered, or symptoms connected with the unfelt swelling—symptoms of pain or distress, or hemorrhage, either in connection with menstruation, or at other times; or he may discover the tumor accidentally, no symptoms being present. Great exercise of judg-

\*A paper read before the Ontario Medical Association, June 4th, 1891.