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Original Communications.

HYGIENE.

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CHAPTER I.—DEFINITION.

THIS subject is rather hackneyed, and it is generally assumed that every one knows about all there is any occasion to know on this vital subject, *vide* letters by the score in our daily papers by representatives of every condition of men—and, as might be expected, very dictatorial in character. There is occasion to fear that the writer indulged in this common delusion, but he was fortified by the fact that he had several diplomas—signed by eminent men who personally guaranteed his knowledge—and what more is needed to enable a man to speak with authority?

“Fools rush in where Angels, &c.”

However, many years ago circumstances demanded a knowledge that on the closest “intraspection” (excuse this word it is probably of a new coinage) he failed to discover, and though his personal ignorance may neither surprise

nor concern the readers of this journal, yet it affected him about as much in the one way as the other. What was to be done about it? Why—consult the authorities—nothing easier—well that depends—of later years there are books that are of value—but formerly, there is reason to think that the men who did write on this subject were in somewhat the same condition as the searcher after knowledge was. The profession, in so far as correct or systematic practice is concerned, “was at sea with defective chart and uncorrected compass.”

Turning to the Sanitary Engineer—save the mark—every builder and architect was a sanitary engineer with theories as numerous as there were individuals coupled with a dogmatic assertion, and given with an honesty that only ignorance of a dense character could furnish. In this dilemma the writer had to look backward and analyze his knowledge but found nothing of moment until he got back to the practical teaching of his first instructors, which, at the time, he had not the capacity to understand, and even yet there is much he is unable to explain that was given in those earliest lessons.

In introducing to your notice his earliest teachers (though not of profes-

sional rank) he would desire to repay a debt, or rather, give credit to those that he fears have never been generally appreciated—though their ministrations have not been confined to the writer.

HYGIENICS OF SURGERY.

The reader will, it is trusted, pardon an attempt to give as briefly as possible a *resume* of the first series on Clinical Surgery. Don't for a moment think there is an intention to give anything original—for the more it is inquired into there is the less chance to find anything "new under the sun." Listerism, at least in its principles, was copied, no doubt unconsciously, from my first clinical teacher, for when thoroughly analyzed and reduced to its elements it is, as was so concisely put by Dr. Farrell many years ago in his inaugural address to students, "Listerism is cleanliness." Hence all the discussions (often acrimonious) so far on the subject have referred to the merest details.

It has been often asserted that a surgical operation with the trephine is required to the end that a *joke* or a new idea may get access to the brain of a man who has the same nativity as St. Patrick—yet the Milesian blackthorn so deftly wielded by the Dr. was sufficient to explain to the writer the soundness of the practice illustrated by his first clinic.

A boy, at some time in his career as such, has a pet dog that like its kind is given to an amorous propensity too often accompanied with quarrels, resulting in severe lesions of continuity that require skilful surgical and hygienic treatment. We may class *Dietetics* under the head of *Hygiene*. Carlo was found one morning in a retired corner very carefully dressing a series of severe wounds, several of which were *punctured*—a class difficult to manage. The writer was more than interested in the subject, for, in addition to curiosity, a true and favored friend was in difficulty. Knowledge acquired since then enables the writer to better describe the case: The limb was placed so that all the muscles were relaxed and it was kept

at perfect rest (1st and 2nd axioms of surgery). 3rd. The dressing. At certain places it was most carefully and lightly touched—at others much more force was used—this was conducted as often as it was required—with, as a result, perfect cleanliness not only of the wounds but all their surroundings. The healing surface had always that look which is so pleasing to the surgeon. At no time, during the treatment was there any appearance of discharge—of pus, of smell, or of feter, and the hair in the vicinity was kept scrupulously clean. As a rule "healing was by first intention," or at least without any evidence of suppuration—a *la Lister*. This was only a part of the treatment. Carlo abstained from food except a little milk, but was very grateful for water that he used often, but in small quantity at a time. All of which is sound hygiene in surgical fever. This condition often demands a laxative, and Carlo's instinct directed him to eat grass in small quantity which produces this effect.

But it would take up too much of your time to dwell longer on what every one thinks he knows—yet it took a Lister to explain the theory of this practice.

Seeing no purulent discharge, I assumed that the dog was not subject to this, but Lister has shown that, by a very elaborate *technique*, he can accomplish as much as a dog can with his tongue. The canine surgeon has however this advantage, that he has the seat of injury always under observation and can anticipate an unfavorable condition, while his human compeer must work in the dark, as, for various reasons, he hesitates to undo the dressings. Canine treatment of fracture, under his limitations as to apparatus, is admirable. The limb is placed in as favorable a position as possible and kept very quiet—with all muscles relaxed—with, as a result, much less shortening and deformity than might be expected.

These first lessons were even more highly appreciated when, in after years, an experience with even intelligent

members of the *genus homo. var. Ang.* and a therapeutics that would not be surpassed by a lineal descendant of Confucius, confirmed them.

As examples.—Called to see a boy with an injured instep and found it enveloped with a foul *quid* of tobacco and commencing erysipelas. Again,—called to see a young woman who had pain in the back from natural causes which was thoroughly understood by patient and attendants and for which my services were requested. On entering the house there was an unsavory odor, and on introducing my hand it entered a huge *cataplasma stercoris bovis* extending from the shoulders to the hips. On protesting 'against this form of poultice—the protest elicited sorrow for my ignorance. At another case treatment was varied by the use of a *cataplasma stercoris humani* which, like the previous prescription, had to be fresh and warm that their virtues might be obtained in full.

At another time the writer was indoctrinated into the virtues of *Pilulæ Agnorum* when collected from the field at the proper time.

Hence there is no occasion for wonder, that admiration for the writer's first clinical teacher was intensified, to which may be added that the longer he lives the greater the appreciation, for there are details in the practice with which he thoroughly coincides, though as yet unable intelligently to comprehend it. For example—his temper was easily roused, but when sick he was the incarnation of meekness and good humour.

But the reader may say we have had enough nonsense—a few common facts diluted with a lot of stuff the writer assumes to be witty. Well the writer will accept the reader's criticism in this regard and he will feel amply repaid for his work, including his failure as to wit, if he can impress one idea on the mind of any reader, viz., that HYGIENE is CLEANLINESS, nothing more, nothing less. The difficult question is how to obtain it—the terms *Listerism*, *Cleanliness* and *Hygiene* being synonymous

—and the converse *Dirt*. The dictionaries (even the International) fail to give a definition of this term satisfactory to scientists, and that of an unknown author is adopted, viz. "Matter out of place."

The reader may justly say that if the preceding part of this paper means anything it is that "*Health is quite inconsistent with filth of the most pronounced type*," and this is undoubtedly the fact failing which the earth's human population would be easily numbered. To explain this incongruity there is no need to depend on the hackneyed expression "the exception proves the rule," (because the phrase is a fraud every way it can be looked at). On the contrary, to the scientific mind of the day it clearly proves the soundness of our accepted pathology—"That taken as a whole disease is the result of the growth and decay of living organisms in the animal economy, and that the organisms can only reach the man or animal through a neglect of proper and obtainable cleanliness. Prevent the arrival of the germs of the disease and filth *per se* will not induce disease, but let the pathogenic element get an entrance and the saddest pages in human history record the conflict of the trio—GERM, FILTH and GENUS HOMO."

What is the history of every epidemic from the *plagues* that decimated the ancient world and middle ages down to cholera and diphtheria of our times and la *grippe* of *to-day* that appears to specially flourish in the houses of wealth and the homes of princes, because its germ there finds its most congenial palulium?

It is not polite to say that this means filth or uncleanness in high places, it is better form to style it "unsanitary," or "defective hygienic conditions." This, however, all means the same thing, and if characterized by the grosser terms it might be more effectually dealt with.

In concluding this chapter let me again insist that Hygiene is, neither more nor less, the scientific term for cleanliness, and it is not to be wondered

at in judging of its attributes that it is placed only next to Godliness.

In studying up this subject so as to be familiar with it—you will excuse the writer for giving his authorities, and this the more because he is old enough now to be able to afford to quote as such those who, not being "titled among men," yet who did their duty and did it well, and laid bare their practice to him, his being the fault if it were not understood. He has had many other similar instructors that treated of different departments in Hygiene, and as we go on these will be introduced to the reader with the *hope* that he may be interested, but with the *certainty* that whether or not the teachers will not be offended even if they could be made cognizant of any want of appreciation.

CARUNCLE OF THE URETHRA—WITH NOTES OF A CASE.

BY FOSTER MACFARLANE, M. D., *St. John.*

M. G., aet. 22, native born, single, employee in cotton mill. Her appearance indicating fair health. Good appetite; fairly well nourished; mother living; has good health. She has no knowledge of her father, Patient always enjoyed good health up to the 18th year of her age. After that time, she stated, that at times, she would have strange feelings she could not describe, not a pain, but, in her own language, an uncomfortable feeling low down in the pelvis, accompanied by difficulty in stooping and making exertion. She also had at this period more or less leucorrhoea. Later these feeling became aggravated, accompanied by frequent and painful micturition, obliging her at times to leave her work and walk the floor for hours. During these exacerbations she was obliged to void urine every five minutes. After thus suffering for a time, her symptoms would abate and she would enjoy comparative comfort until the next attack. She first menstruated at 13 years of age, and has been always regular since. The flow continues for three days and is unaccompanied by pain, she uses 5 or 6 napkins during the period.

By inspection the vulva was found swollen and hyperaemic and extremely sensitive to the touch. On gently separating the labia a

growth was discovered in the vestibule on the left margin of the meatus. It seemed to be made up of several small growths which almost surrounded the orifice, and were so impacted into each other as to give them the appearance of one solid growth. It was so exceedingly sensitive that only a visual inspection could be made without an anaesthetic. The base of the growth was ovoid, measuring, I should judge, about 1.5 C. M. in its greater and 1 C. M. in its lesser diameters. It was pyramidal in shape and its surface was highly vascular as was revealed by its bright scarlet summit. The rest of the growth being covered by a light gray secretion which could not be wiped off to allow an examination, owing to the extreme sensibility of the parts.

In a *resumé* of the case the following symptoms were noted:—Difficulty in stooping and on making exertion, frequent and painful micturition, and extremely sensitive and vascular growth situated at the orifice of the urethra, and these accompanied by leucorrhoea. There seemed no doubt but the case was "*Caruncle of the Urethra.*"

This neoplasm to which has been given the name "Caruncle" likewise received the names of "*Vascular tumor,*" "*Irritable vascular excrescence of the Urethra,*" &c.

Pathologists are agreed that the "growth consists of hypertrophied papillæ that spring up at the edges of the meatus and sometimes along the walls of the urethra, as little vascular growths, which are of a bright scarlet color, exquisitively sensitive under pressure and are of a soft, spongy, and erectile structure, with a smooth, fissured or granulated surface not unlike a raspberry. They are generally pear shaped and in size vary from a small pea to that of a horse-bean. Their vessels which are exceedingly numerous terminate in an abrupt loop. They are also supplied with nerves, a circumstance that accounts for their extreme sensitiveness."

This disease seems to occur oftener in middle-aged married women, but young girls are not exempt.

As a rule it produces great suffering. Sexual intercourse is accompanied with great distress. It is very often the cause of dyspareunia and hence sterility. She has frequent and painful micturition, and in aggravated cases the suffering is so great that it passes the point of endurance, and the effects upon the nervous system is such as to cause the sufferer sometimes to end her miseries by suicide.