

Memoranda

MEDICAL, SURGICAL, OBSTETRICAL

SURGICAL EMPHYSEMA COMPLICATING ARTIFICIAL PNEUMOTHORAX

Minor degrees of subcutaneous emphysema in the course of treatment by artificial pneumothorax are common, their unimportance being evidenced by dismissal in a line or two in textbooks. Emphysema of severe degree appears to be uncommon, few references being found in English literature as to effectual treatment.

HISTORY OF CASE

A male aged 26 years had had treatment elsewhere for two months without material improvement. On admission the general condition was good, but there was some degree of cyanosis; temperature, 97° to 99°; pulse, 80 to 112. Some cough and dyspnoea. Impaired resonance over right upper lobe and down to root of lung, with coarse rales all over the lung; the left lung was clear clinically.

X-ray examination: Right apex opaque, with no response to cough; diaphragm moved well, with costo-phrenic angle clear; dense mottling with cavitation in upper and mid-zones; small area of mottling in left mid-zone.

The patient was kept at absolute rest for a further six weeks, but lost weight; pyrexia continued. During induction of right artificial pneumothorax the pleura was felt to be thick and tough. The preliminary manometer reading -3, -1, indicating limitation of the pleural cavity by adhesions. In view of the bad prognosis even partial collapse appeared desirable, and 200 c.cm. of air was introduced, the final reading being -2, +4. The patient was quite comfortable. Two hours later he had a severe bout of coughing and felt a sharp pain in the right side, soon after complaining of stiffness and swelling of the neck. No crackling could be made out over the site of puncture. Cough continued to be severe, and within twenty-four hours the patient was unrecognizable, resembling the well-known figure advertising a make of motor-tyre. The emphysema affected the whole of the trunk, both arms and legs, and neck and face, with large blebs of gas under the conjunctivae and mucosa of nose and mouth. Only those parts compressed by his position in bed, the ears, and scalp were spared. The skin on the chest was lifted from the deeper structures by approximately 4 inches, and during the next seven days, in which the degree of emphysema appeared to be maintained at its maximum, several areas became red and glazed.

Treatment consisted in frequent attention to the eyes, nose, and mouth, gross infection being prevented. An attempt to draw off the air originally introduced was unsuccessful. Puncture of the skin could not be persisted in owing to the danger of sepsis, and the most effectual measure appeared to be the general application of heat and relief of tension on danger points by change of position and compression.

COMMENT

The risk of occurrence of emphysema of such severity may be limited by more careful selection of cases, low pressures, small needles, and control of cough; it may occur when spontaneous pneumothorax appears during treatment by artificial pneumothorax, or when adhesions are ruptured. The air may leave the pleural sac through the puncture or travel along the subfascial plane, but it is more likely to track backwards interstitially to the hilum of the lung and mediastinum,¹ appearing first in the root of the neck—in such cases it may appear round the kidney¹ and even infiltrate the pericardium.² In the case reported it is probable that an adhesion was ruptured during the bout of coughing; the degree of emphysema could not have been caused by the amount of air introduced.

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Medical Superintendent, Creaton Sanatorium,
Northampton.

¹ Ballon and Francis: *Arch. Surg.*, December, 1929.

² Aronson, A.: *Tubercle*, June, 1922.

Reports of Societies

PLASTIC SURGERY

At a meeting of the Harveian Society of London, held on October 13th at the Hammersmith Hospital, with Mr. C. P. G. WAKELEY in the chair, Sir HAROLD GILLIES gave a lantern and cinematograph demonstration on plastic surgery.

Sir HAROLD GILLIES first exhibited a girl of about 8 years of age to the meeting. When admitted to hospital she had had a purple naevus extending from the bridge of the nose to the upper lip and on to both cheeks. He had brought down the skin of her forehead on a double temporal artery pedicle, so that it covered the naevus over her nose and on the cheeks; the area of naevus on the upper lip had been replaced by a Thiersch graft, and a similar graft had been used to cover the stripped forehead area. No trace of the naevus was now apparent.

The first cinematograph film showed a buccal inlay in a patient severely scarred by lupus. These patients, Sir Harold said, frequently suffered from shortage of mucous membrane in the mouth, the lower lip being tied down to the gum by scarring. With intratracheal anaesthesia the pharynx was packed with gauze, the lower lip was freed from the jaw-bone from the base of the teeth to the tip of the chin, and into the sulcus so formed dental modelling material was packed and a mould made. A thin skin graft, taken from the arm, was then folded round the mould in such a way that the raw surface of the graft lay outside and the uninjured surface in contact with the mould. The mould was inserted into the sulcus so that the raw surface of skin was in apposition with the raw surfaces of the wound. Sir Harold pointed out the importance of cutting a graft of even thickness and all in one piece; if it was torn the fragments were certain to be displaced when the mould was slipped into position. By means of lantern slides it was demonstrated that the retracted upper lip could be freed in the same way in cases of repaired hare-lip. Once the loss of mucous membrane had been replaced by a skin graft the lip could be brought forward on a dental appliance to give the normal contour. Other slides illustrated the treatment of the depressed nose of congenital syphilis on similar lines. Here again, the speaker said, the important factor was loss of mucous membrane. This was made good by a skin graft introduced on a mould through the mouth, the incision being made in the angle between the upper lip and the anterior surface of the maxilla. Once the graft had taken the patient could use a dental appliance to keep the nose forward, or a cartilage bridge could be introduced. Burns with severe scarring could be repaired by Thiersch grafts; the excellent results obtained where scarring had led to severe ectropion of the eyelids were demonstrated by slides.

A second film showed the restoration of the nose in a small boy, cured of lupus. The scar tissue of the original nose was used to form the lining of the new one. Special care had to be taken to ensure that this flap had a good blood supply, as many of these cases had a poor vascular supply in the healed skin owing to treatment with x rays. The skin flap for the new nose was taken from the forehead, brought down on a sickle-shaped pedicle, and stitched into place with fine silkworm-gut on eyeless needles. Other examples illustrated by slides were: a case in which a forehead flap had been used to repair a hairy mole on the cheek, and the method by which pedicle grafts could be taken from the abdomen, first to the arm, and then to the scalp, by division of the original pedicle. This was applied in a case of avulsion of the scalp.

In a third film an operation for virginal hypertrophy of the mammae was demonstrated. Sir Harold said that as much as six or eight pounds of degenerated breast tissue and fat might be removed. A circular incision was first made round the nipple so as to preserve some of the ducts. This was followed by two curved incisions with the concavity towards the head of the patient, one above the nipple and the other on the under surface of the breast

THE LATE DR. FLORENCE STONEY

Dr. S. WATSON SMITH, chairman, Bournemouth Division, British Medical Association, sends the following appreciation of Dr. Florence Stoney, of whom an obituary notice appeared in our last issue.

Dr. Stoney was a radiologist to the Royal Victoria and West Hants Hospital here since the war. After long years



of hard work in London and the excessive strain of war work abroad and at home she came to Bournemouth, where she carried on her excellent work in a quiet and efficient way. It is now notorious that the pioneers in x-ray work and those exposed unduly to unprotected rays usually die very painful deaths, and Dr. Stoney was no exception: she suffered greatly and bravely, and she knew quite well what would be the manner of her death.

One regrets a little that after such brilliant war work Dr. Stoney was not honoured more; but then she was one of the quiet, steady workers in our profession who go so often unsung. Yet she worked for the love of her profession and of her patients, and asked no honour and no thanks. She was a pioneer in radiology, and a great woman doctor.

[The photograph reproduced is by Elliott and Fry, Ltd.]

The following well-known foreign medical men have recently died: Dr. OSKAR FÖDERL, an eminent surgeon of Vienna, aged 67; Professor ALEXANDER v. ROTHE, formerly director of the surgical department of the Municipal Hospital, Berlin-Wilmersdorf; Dr. PAUL CHARMEIL, formerly director of the dermatological clinic at Lille; Dr. ALFRED LOUIS RICARD, surgeon to the Paris hospitals and honorary editor of the *Gazette des Hôpitaux*; Dr. ARCADIVS PULAWSKI, formerly editor of the Polish medical journal, *Gazeta Lekarska*; and Professor FELIX PUTZEYS, founder of the Institute of Hygiene at Liège and Grand Officer of the Order of Leopold, aged 85.

The Services

DEATHS IN THE SERVICES

Colonel Frederick Fitzgerald Carroll, D.S.O., R.A.M.C. (ret.), died of pneumonia in London on October 5th, aged 57. He was born on November 27th, 1874, at Castledermot, Kildare, the son of Frederick Maxwell Carroll, Esq., of Moone Abbey, Kildare, and was educated at Trinity College Dublin, where he graduated as M.B., Ch.B., and B.A.O. in 1897, subsequently studying at Bonn and Vienna as holder of the Surgical Travelling Scholarship. He entered the R.A.M.C. as surgeon lieutenant on January 29th, 1898, one of the last batch appointed with the compound titles, became lieutenant-colonel in the long war promotion list of March 1st, 1915, was promoted to colonel on March 23rd, 1922, and retired on March 28th, 1926. He was seconded for service with the Egyptian Army from March 19th, 1907, to March 18th, 1920. He served in the operations in the Aden hinterland in 1903-4; in operations in the Atwot region of the Sudan in 1910, receiving the Egyptian medal with a clasp, and the fourth class of the Osmanieh; and in the Sudan operations in 1914, in the Nuba Mountains and at Maneloh Sabai, when he was mentioned in dispatches in the *London Gazette* of October 25th, 1916, and received the medal with a clasp, the D.S.O., and the third class of the Order of the Nile. From 1923 to 1925 he served as an A.D.M.S. in the Northern Command in India. In 1918 he married Evelyn, daughter of the late Colonel Sir Edgar Bernard.

Medical Notes in Parliament

[FROM OUR PARLIAMENTARY CORRESPONDENT]

Parliament reassembled on October 18th. In the House of Commons discussion commenced upon the Ottawa agreements for the development of Empire trade, and Mr. Chamberlain presented resolutions to authorize certain new duties on imports to the United Kingdom.

A meeting of the Parliamentary Medical Committee was arranged for October 20th.

Universities and Colleges

VICTORIA UNIVERSITY OF MANCHESTER

The following candidates have been approved at the examination indicated:

DIPLOMA IN PUBLIC HEALTH.—(Part II): Charlotte E. Forsyth, V. A. Newton.

UNIVERSITY OF DUBLIN

At the autumn commencements, held in Trinity College in Michaelmas Term, the following degrees were conferred:

M.D.—T. F. M. Woods, W. E. Hutchinson (*in absentia*).

SCHOOL OF PHYSIC, TRINITY COLLEGE

The following candidates have been approved at the examinations indicated:

FINAL MEDICAL EXAMINATION.—Part I (Old Regulations), *Materia Medica and Therapeutics, Medical Jurisprudence and Hygiene, Pathology and Bacteriology*: H. L. Connor, C. O. Greer, B. E. W. Aldwell, P. St. G. Robinson. (New Regulations), *Materia Medica and Therapeutics, Pathology and Bacteriology*: Marie J. S. O'Toole (passed on high marks), W. G. B. Halliden, A. F. J. Delany, J. F. Harbison, A. E. Fannin, A. R. S. Jessop, R. C. Tyner, H. M. Glover, Doris E. Morton, D. J. O'Shaughnessy.

DIPLOMA IN GYNAECOLOGY AND OBSTETRICS.—J. Borg, A. El Sayed El Khishin.

ROYAL COLLEGE OF SURGEONS OF ENGLAND

A quarterly Council meeting was held on October 13th, the President, Sir Holburt Waring, being in the chair.

Sir Henry S. Wellcome, LL.D., F.S.A., was introduced, and admitted an Honorary Fellow of the College. Mr. Herbert Alstead was introduced, and signed the Roll of MacLoghlin Scholars. The secretary reported the death, on September 14th, of Sir James Charters Symonds, past Vice-President and member of the Council, and a vote of condolence was passed by the Council.

Diplomas of Fellowship were granted to Frederick Langley and to William E. A. Hughes-Jones. The diploma of Membership was granted to Herbert F. Moseley.

The treasurers reported that Sir Buckston Browne had made further grants of £9,139 10s. 4d., and in pursuance of his promise had now raised the amount of his gift for the Research Farm to £100,000. The Council expressed sincere appreciation of all that Sir Buckston Browne is doing to promote surgical biological research, and conveyed to him grateful thanks for his great liberality.

Museum Demonstrations

The three museum demonstrations by Sir Arthur Keith, arranged for Fridays, October 21st and 28th, and November 4th, have been unavoidably postponed.

ROYAL COLLEGE OF SURGEONS IN IRELAND

The following candidates have been approved at the examinations indicated:

PRIMARY FELLOWSHIP EXAMINATION.—J. J. Fitzsimons, Margaret D. Gregg, E. A. McManus, H. D. O'Brien.

FINAL FELLOWSHIP EXAMINATION.—J. H. Coolican, M. A. W. Roberts.

CONJOINT BOARD IN IRELAND

The following candidates have been approved at the examinations indicated:

FINAL PROFESSIONAL EXAMINATION.—K. O'M. Barrett, F. R. Duggan, J. D. McClelland, Sheila E. Macdonald, F. E. McLaughlin, M. F. MacNamara, R. A. M. Montgomery, J. Murphy, P. D. O'Rourke, J. Tierney, G. A. R. Warren.

D.P.H.—T. V. Fitzpatrick.

UNIVERSITY COLLEGE, CORK

The diploma in psychological medicine has been awarded to Hegarty Denis, M.B.

Medical News

A meeting of the Medico-Legal Society will be held at 11, Chandos Street, W.1, on Thursday, October 27th, at 8.30 p.m. Sir John Collie will read a paper on "Fraud in medico-legal practice." The annual dinner of the society will take place at the Holborn Restaurant on Friday, December 9th, at 7.15 p.m., when the president, Lord Riddell, will be in the chair.

The syllabus of meetings of the Torquay and District Medical Society for 1932-3 has been issued. At the first meeting, on October 20th, Dr. Leonard Findlay read a paper on acidosis and alkalosis. A clinical meeting will take place at the Torbay Hospital on November 3rd, and on November 17th Dr. Cameron Davidson will give his presidential address on some theories of the causation of death. At the meeting on December 15th a discussion on the treatment of chronic rheumatism will take place. Ordinary as well as clinical meetings will continue to be held until June 1st.

The World League for Sexual Reform has arranged to hold a meeting at the London School of Hygiene and Tropical Hygiene at 8 p.m. on Thursday, November 3rd, to discuss the present state of the abortion laws in this country. Any medical man or woman interested may obtain full information by writing to the secretary, 127, Harley Street, W.1, enclosing a stamped addressed envelope for a reply.

At the meeting of the Royal Sanitary Institute at Durham on Friday, November 4th, a discussion on "Infectious diseases hospitals—modern ideas on construction and administration" will be opened by Dr. J. A. Charles, deputy M.O.H., Newcastle-upon-Tyne.

A meeting of the Mental After Care Association will be held at Springfield Mental Hospital, Beechcroft Road, Upper Tooting, on Tuesday, October 25th, at 3 p.m., with the president, Lord Wakefield, in the chair. The speakers include the Dean of Westminster, Miss Ruth Darwin, Mr. E. J. Sainsbury, and Mr. C. L. de Salis.

The second of the series of lectures on renal disease arranged by the Fellowship of Medicine will be given at the Medical Society of London, 11, Chandos Street, W., on October 25th at 4 p.m., when Mr. Everidge will discuss surgical aspects of haematuria. A week-end maternity course will take place at the City of London Maternity Hospital on October 29th and 30th. The first of a series of three demonstrations on clinical pathology, specially suitable for M.R.C.P. candidates, will be given by Dr. Knyvett Gordon at 10, Bedford Square, W.C., on October 26th at 8.30 p.m. From October 31st to November 19th an afternoon course in ophthalmology will be given at the Royal Westminster Ophthalmic Hospital. A course in neurology will take place at the West End Hospital for Nervous Diseases, daily at 5 p.m. from October 21st to November 26th. Other courses during November are: medicine, surgery, and gynaecology, at the Royal Waterloo Hospital, November 7th to 26th (afternoons and some mornings); diseases of the chest, at the Victoria Park Chest Hospital, November 14th to 26th (all day); venereal diseases, at the Lock Hospital, November 14th to December 10th (afternoons and evenings).

A course of lecture-discussions on mental defectiveness as a medico-sociological problem will be opened at the Royal Institute of Public Health, Queen Square, W.C., on Thursday, October 27th, by Professor R. J. A. Berry, chairman of the Mental Deficiency Committee of the British Medical Association, who will deal with the medical and social considerations of the subject. The chair will be taken by Mr. C. J. Bond, consulting surgeon to the Leicester Royal Infirmary, at 4 p.m. The course will be continued on succeeding Thursdays until December 1st.

Part I of the post-graduate courses for ship surgeons, arranged by the Seamen's Hospital Society, will be held at the London School of Hygiene and Tropical Medicine, Keppel Street, W.C., from November 14th to December

2nd. The course will include lectures and demonstrations on water, food, the construction and sanitation of ships, infectious diseases, and port sanitary work.

The annual meeting of the Manitoba Medical Association, held at Winnipeg last month under the presidency of Dr. Ross Mitchell, was highly successful. The papers were of a high standard, and the number of members registered was the largest on record. The proceedings lasted three days, ending with the annual dinner and dance at the Royal Alexandra Hotel.

An extra-metropolitan dinner of the University of London Medical Graduates Society was held on October 13th at the Grand Hotel, Brighton. The president, Lady Barrett, C.H., reminded the members and their guests that the society was still very young, only four years' old, but was growing sturdier every year. It was a frivolous society, but it provided a common meeting ground, and formed a social link between medical graduates of the university belonging to different medical schools throughout the country. The society was developing a corporate spirit among the graduates of the Medical Faculty, which the new university building, when erected, should do so much to promote. Mr. McAdam Eccles announced that the membership of the society had now reached 500, and included a recent influx of graduates practising over-seas with whom he had been in touch during the Centenary Meeting of the British Medical Association.

The quarterly meeting of the court of directors of the Society for Relief of Widows and Orphans of Medical Men was held at 11, Chandos Street, on October 12th, with the president, Mr. V. Warren Low, in the chair. The deaths of three members were reported, also the death of one of the widows, who had been in receipt of grants since 1918; her late husband had paid in subscriptions £52 10s., the maximum amount that any member pays; his widow received a total sum in grants of £1,100. Three new members were elected. Three widows applied for relief, and were each granted £50 per annum from the ordinary funds, two, being over 65 years of age, £25 per annum from the Brickwell Fund each, and the third, being under 65, a grant of £10 per annum from the same fund. A total sum of £176 15s. was voted as special grants to widows to enable them to continue with the education of their children, who had reached the age of 16, at which age the ordinary grants cease. It was decided to make a Christmas present of £15 to each widow over 75, £10 to each widow under that age, and £10 to each orphan; a sum of £640 was voted for this purpose. Membership of the society is open to any registered medical practitioner who, at the time of his election, is resident within a twenty-mile radius of Charing Cross. The annual subscription is small compared with the benefits that may be received; there are special terms for life membership. Full particulars and application forms for membership may be obtained from the secretary, 11, Chandos Street, Cavendish Square, W.1.

At the session of the Académie de Médecine on October 4th, Dr. Manchoux delivered an address on Sir Ronald Ross, who was a foreign member of the Académie.

Professor Martini of Berlin has been appointed professor of internal medicine at Bonn, and Professor Bessau of Leipzig professor of children's diseases at Berlin in succession to Professor Czerny. Professor Arthur Schlossmann retired from the chair of children's diseases at the Düsseldorf Academy of Medicine on April 1st, and has since died.

The University of Oslo has received a gift of 20,000 kronen from a Norwegian chocolate factory for the foundation of a chair of the physiology of nutrition.

The French Academy has recently awarded its triennial Capuran prize for the best lyrical or dramatic work to Dr. J. Giuliani, alias Germain Trezel, for his play *La Tunique de Nessus*.

There has recently been an increase in the incidence of poliomyelitis in various parts of Germany. Fifty cases with four deaths have occurred in the third quarter, as compared with twelve cases in the first quarter.