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CLINICAL LECTURES,

IN COURSE OF DELIVERY DURING THE PRESENT SESSION
AT GUY'S HOSPITAL,

BY BRANSBY B. COOPER, ESQ. F.R.S.

(Published with Permission of the Lecturer.)

WEDNESDAY, DEC. 23, 1840.

LECT. VIII.—On Tumors, and a Case of Exostosis.

GENTLEMEN,—The case which I dare say most of you have seen in Philip's ward, is one of more interest in a pathological than in a surgical point of view, as I fear the disease is now so far advanced, that we cannot hope to effect a cure either by operative or medical treatment; the disease is exostosis. You may be asked what is exostosis? and reply, a bony tumor. Then it follows, what is a tumor, and you may find it a little more difficult to give a correct definition. Some say a swelling, others an unnatural enlargement; but these are obviously too indefinite to give any correct idea of the disease. John Hunter says, a tumor is a circumscribed substance produced by disease, and different in its nature and consistence from the surrounding parts; but this will only apply to some classes of tumors, for the steatomatous or fatty tumor does not differ from the surrounding parts in nature or consistence, being a mere circumscribed hypertrophy of the adipose tissue. Exostosis, again, partakes of the nature and consistence of the structure from which it arises. We say then that a tumor is an unnatural enlargement, a new growth of substance which was not included in the original structure of the body. What are the causes of these adventitious growths? In the first place, violence of any kind, as a blow, may often be traced as the source; but how does the injury operate? John Hunter advocated the opinion that blood was effused, became coagulated, its serum absorbed, and the remaining fibrin subsequently organized by the extension of vessels into it from the surrounding parts; but this view appears to be untenable, for effusions of blood are daily occurring into various textures of the body, while it is very rarely that any thing like a tumor can be said to follow. And further, as far as we can trace these growths to their first appearance, they have not the physical characters of organized fibrin, but the same peculiarity of structure by which they are characterized when further developed. Then it is supposed that a degree of inflammation may be set up in the structures which are the seat of disease or injury, under which coagulable lymph is effused, and organized; or that the growth takes place under the influence of continued chronic inflammation. But we know that all this may go on, and does so daily, without any tumor ensuing, and all we can say is that there is

some aberration in the nutrition of the part, which we are not likely to understand very clearly, till we have some more definite knowledge with regard to the processes of growth and nutrition during health. There is no doubt some peculiar constitutional diathesis which predisposes the individual to the growth of tumors, because we frequently find that they are hereditary, and this applies especially to exostosis.

It is a most important point to discriminate the kind of tumor which is presented to your notice, in order to form your judgment as to the treatment to be employed, the danger to which the patient would be subject from its progress, and the best mode of removal. The diagnosis is often very difficult; but still, by a careful examination into the history of the case, the structures in which the growth has arisen, the effects produced on the part and on the system in general, and the physical characters of the enlargement, we can generally arrive at a correct knowledge of its nature. To assist us in this inquiry, various systems of classification have been suggested, most of them based on the physical condition of the tumor. Thus they were divided into fleshy, osseous, and encysted tumors; and Mr. Abernethy afterwards made a classification according to the textures which they resembled. Hence he styled some tumors mammary, not because they arose in some glandular structure, but because they resembled the mammary gland in their physical properties; and others medullary, because they partook of the characters of brain. Other writers have classed them according to their figure, form, or solidity; but it appears much more philosophical to follow the method of Dr. Warren, of Philadelphia, and arrange them not with regard to their physical conditions, but to the texture which is the subject of disease. Thus the skin is subject to warty tumors, which consist simply of enlargement of the cuticular papillæ, and to sebaceous tumors, from concretion of the secretion of the sebaceous follicles. Muscles are more subject to paralysis, convulsions, and other lesions consecutive to disease in the nervous system; but after laceration they are re-united by a fibrous or fibro-cartilaginous substance, which inasmuch as it is an unnatural adventitious matter, differing from the surrounding parts, is a tumor. Then the cellular tissue is the seat of several varieties of these growths; the simple fleshy tumor, or vascular sarcoma, which probably arises from the organization of coagulable lymph; the fatty or steatomatous tumor, or adipose sarcoma, differing from the cellular tissue in which it is embedded, as its cells, like those of the adipose and unlike those of the cellular, do not communicate with one another. Then we have the different tumors found in bone. A consideration of these distinctions will help you considerably when you come to make your diagnosis. You