

PROVINCIAL MEDICAL & SURGICAL JOURNAL.

EDITED BY DR. HENNIS GREEN AND DR. STREETEN.

No. 24. Vol. I.] LONDON, SATURDAY, MARCH 13, 1841.

PRICE SIXPENCE.
[STAMPED EDITION SEVENPENCE.]

	PAGE		PAGE
MR. BRANSBY COOPER ON PILES AND PROLAPSUS ANI	385	CONSTITUTION AND ACTS OF THE MEDICAL CONFERENCE	395
Mr. Adams on Eversion of the Eye in Squinting	387	Dr. Forbes's Plan of Medical Reform	396
Mr. Lucas on Stammering, and its Cure by Operation	389	Mr. Rumsey on Poor-law Medical Relief	397
Case of Fever apparently produced by Gas, by Henrick Watson, Esq. Stourport	391	Letter from Dr. Macartney	399
On Fracture of the Patella, by George Gulliver, Esq.	ib.	Letter from Mr. Wickham	ib.
On a New Apparatus for Fracture of the Thigh, by F. A. Bulley, Esq. Reading	392	Newcastle Assizes. Important Trial	ib.
Court Appointment	393	Life of Sir A. Cooper. Letter from Mr. Churchill	490
SWALL-FOX AND VACCINATION. DR. GREGORY'S REPORT	ib.	House of Commons. Poor-law	ib.
		Appointments at the College of Surgeons—List of Members	ib.

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.)

MONDAY, MARCH 8, 1841.

LECT. XII.—On Piles, Fissure of the Rectum, and Prolapsus Ani.

GENTLEMEN,—At the particular request of several members of this class, I purpose this morning to lay before you the result of my experience and practice with regard to piles; and I do this the more willingly, as I know that there are at present several patients in the habit of coming to the surgery, who are suffering from this disease, and are under the care of the dressers, or the surgeon who attends to the out-patients. Some persons might treat this subject lightly, and pass over a case as "only piles;" but when you consider the extreme frequency of the disease, especially among the higher orders, the great inconvenience and suffering it induces, the facility of cure under careful management, and the numerous evils and danger which result from improper treatment, I think you will see that I might spend the hour less profitably on more popular topics.

One of the frequent symptoms of piles is a flow of blood after the passing of a motion, and from this the term hæmorrhoids is derived, from *αἷμα*, blood, and *ῥέω*, to flow; but this is observed before any excrescence can be detected, and is merely a transudation of blood through the coats of the congested hæmorrhoidal veins. Accompanying this, there is considerable heat about the fundament, a feeling of weight and constant uneasy sensations, either at the verge of the anus or in the situation of the rectum itself, tenesmus, mucous discharge, pain in the thigh, and often frequent desire to make water. In this stage, we have not a mere local disease, but a condition *always* connected with some derangement in the functions of the abdominal viscera, as congestion of the vena porta from some irregular action of the liver, by which the free return of the blood from the hæmorrhoidal veins is impeded, and congestion consequently ensues; and therefore, those surgeons who merely employ local or mechanical means fail to give relief, while those who attend to the due performance of the digestive functions almost always relieve, and, by removing the cause, effect a cure and prevent a return. It is not well to suddenly check the bleeding, because it is a kind of safety valve by which the congested veins are relieved,—a *signum salutis*; and the patients themselves are so sensible of the relief afforded to the urgent symptoms by the

bleeding, that they often, without consulting a surgeon, expose the nates to hot vapour, in order to encourage the flow. But if they go on in this way they are only mechanically relieving themselves;—the cause remains as before; the veins which were merely congested become varicose; the passage of the blood through them is more and more retarded; it coagulates and forms an excrescence, which projects into the rectum; the mucous membrane is irritated; and the disease becomes permanent, because it was not properly attended to at first.

Now, a most effectual means in the treatment of piles, is to direct your patients to get into the habit of passing their motions at night, just before going to bed. You know the more usual time is just after breakfast, but just consider for a moment the effect of this on an irritable rectum. The upright posture prevents the rectum from receding into the pelvis, and it is, therefore, left within the action of the levator ani and the sphincters. These compress the irritated mucous membrane, and being like all muscles which are partly voluntary and partly involuntary, excited to contract through the medium of the nerves of the mucous membrane,—as these nerves are morbidly sensitive, so the contractions of the muscles are immoderately violent. The man passes his motion in the morning; goes about his usual occupations; the rectum is thrust within the action of the irritated muscles; it cannot recede into the pelvis and pass from their scope, and the greatest suffering follows. You will see the patient first sitting on one buttock, then on the other, then rubbing his thigh; he will complain of pain in the soles of the feet, and get up and walk about. His face is pale, tongue white, pulse irritable, and he has every mark of irritative fever. But suppose the bowel is emptied at night; he lies down directly after; remains eight hours in the recumbent posture; the rectum recedes; it is no longer subject to the contractions of the levator and sphincter; these become less irritable, and the patient forgets that he has a rectum. I am quite sure that there is nothing more important in the treatment of piles, either curative or preventive, than an adherence to the habit of regularly passing the motions at night. You will require, however, a little assistance from laxative medicines; but do not *purge* the patient, but give such doses as will merely assist the alimentary organs in their functions, rather than exciting them to undue or violent action. Give small doses of the pilula hydrargyri, and a sufficient quantity of rhubarb to ensure a free action of the bowels once a day; and with this you may give the carbonate of ammonia with infusion of gentian, to act as a mild tonic. The use of enemata is also very important; but remember that, where there is bleeding, the result of hepatic congestion, astringent injections should be very