

ART. VII.—*Synopsis of Thirty Cases of Ovariectomy occurring in the Practice of the Author.* By WASHINGTON L. ATLEE, M. D., of Philadelphia.

CASE I.—The first operation was performed on the 29th of March, 1844; patient, Mrs. G. S., aged 61 years. The incision extended from two inches above the umbilicus to the pubis; the tumour cystiform, bilocular, non-adherent, weighing about twenty-five pounds. The colon was involved in a broad pedicle. Both ovaries diseased. Constitution very feeble. Death from insidious peritonitis on the sixth day. (Reported in the *Amer. Journ. of the Med. Sciences*, N. S., vol. viii. p. 48.)

CASE II.—Operation, 28th of August, 1844; patient, Miss L. P., aged 24 years. Incision from umbilicus to pubis; tumour extra-uterine, fibrous, weighing nearly two pounds. Pedicle very thick and fleshy. Violent peritonitis. Intestines during the operation very troublesome. Recovery. Died three years afterwards of phthisis pulmonalis, an hereditary disease. (Reported in the *Amer. Journ. of the Med. Sciences*, N. S., vol. ix. p. 309.)

CASE III.—Operation, 15th of March, 1849; patient, Mrs. E. K., aged 29 years. Incision from symphysis pubis to middle of crest of ilium on right side, seventeen inches long; tumour ovarian, fibrous, firmly and extensively adherent to the bones of the pelvis and to the iliac vessels of the right side, weighing eight pounds. Poupart's ligament was embedded in the tumour and stretched across it. Complete procidentia uteri. A mixture of one part of chloroform and two parts of ether, liquid measure, inhaled with the happiest effects. Recovery. Still living.

Note.—As a matter of physiological interest, it may be well to state that

this patient has been twice pregnant since the operation, but in consequence of the great dread of parturition, abortion, without my knowledge, was artificially induced. (Reported in the *Amer. Journ. of the Med. Sciences*, N. S., vol. xviii. p. 336.)

CASE IV.—Operation, 22d of May, 1849; patient, Miss M. T., aged 33 years. Incision four inches above umbilicus to pubis; tumour uterine, non-adherent, not removed. Anæsthesia. Recovery. Died six months after from erysipelas. (Reported in the *Amer. Journ. of the Med. Sciences*, N. S., vol. xix. p. 318.)

CASE V.—Operation, 16th of June, 1849; patient, Miss H. M., aged 25 years. Incision from two inches above umbilicus to pubis. One large cyst extensively adherent to the omentum by its anterior surface; four gallons of chocolate-coloured fluid removed one week before; weight of tumour, forty pounds. Anæsthesia. Recovery. Still living.

Note.—Before the operation this patient had been the mother of an illegitimate child. She has been married since, and has given birth to two large, healthy children, a boy and a girl, passing through the period of both gestations without inconvenience, and having easy and speedy labours. (Reported in the *Amer. Journ. of the Med. Sciences*, N. S., vol. xix. p. 328.)

CASE VI.—Operation, 13th of October, 1849; patient, Miss M. B., aged 43 years. Incision from one inch above the umbilicus to pubis; tumour uterine, with large cystiform bodies incorporated with it; non-adherent, not removed. Anæsthesia. Recovery. Died between three and four years afterwards from the progress of her disease. Weight of the mass, removed after death, fifty pounds.

CASE VII.—Operation, 24th of November, 1849; patient, Mrs. T. H., aged 39 years. Incision the same length as in Case VI.; tumour extra-uterine, fibrous, non-adherent, weighing six pounds. Pedicle very thick and fleshy, attached to fundus uteri. Menses present at the time of operation, and continued without interruption. Anæsthesia. Recovery.

Note.—This patient had recovered perfectly, was about the house, ate a hearty dinner of duck, felling, &c., which brought on an attack of cholera morbus, resulting in death thirty-nine days after the operation. In her best health before the operation, she for years avoided eating duck, because it invariably caused cholera morbus.

CASE VIII.—Operation, 6th of February, 1850; patient, Miss L. N., aged 30 years. Incision same length; tumour cystiform, very adherent; two round, strong, vascular cords bound the cyst to the recto-vaginal *cul-de-sac*, requiring ligatures. Weight, fourteen pounds. Anæsthesia. Death from peritonitis on the sixth day.

Note.—This was not an unfavourable case for the success of the operation; and up to the evening of the fourth day, there was nothing to interfere with recovery. That evening she imprudently ate an orange, including the pulp, and soon after inflammation commenced.

CASE IX.—Operation, 16th of February, 1850; patient, Mrs. F. C., aged 48 years, and greatly prostrated by her disease—indeed, danger of death

seemed impending. The stomach rejected all food, and the bowels were obstinately obstructed, as if by the pressure of the tumour. Incision same length; tumour cystiform, inseparably adherent to the viscera; adhering portions of the cyst were detached from the rest, and permitted to remain; spermatic artery cut and tied; weight, twenty-eight pounds. Anæsthesia. Death from exhaustion on the third day.

CASE X.—Operation, 19th of March, 1850; patient, Mrs. S. L., aged 40 years, and so enfeebled by disease that her death was looked for daily. The ovarian dropsy was complicated with ascites; for the latter she had been tapped five times. The lower limbs were anasarcaous and ulcerated, weeping away immense quantities of water. Incision same length; tumour cystiform; the omentum was much thickened, œdematous, spread over the cyst, and almost inseparably adherent; the uterus was also extensively adherent. Weight of tumour, twenty-five pounds, in addition to several gallons of peritoneal fluid. Anæsthesia. Death from exhaustion on the third day.

Note.—In both these cases the operation was performed only with the hope of arresting the progress of approaching death.

CASE XI.—Operation, 13th of April, 1850; patient, D. S., aged 41 years, coloured single woman. Incision from near the umbilicus to pubis. Tumour uterine, non-adherent, not removed. Anæsthesia. Recovery. Still living.

Note.—In this case the intestines were very troublesome. They were forced out, and could scarcely be returned, in consequence of the anæsthetic agent inducing a cataleptic condition of the muscles, which extended to the muscular parietes of the abdomen. A favourable recovery, and improved health since the operation.

CASE XII.—Operation, 15th June, 1850; patient, Mrs. D. H., aged 37 years. Incision same length; tumour cystiform, extensively adherent; a portion of the cyst, as large as the palm of the hand, could not be separated, and was left *in situ*. First cut the pedicle, then picked out the vessels and tied them separately. Weight of tumour, twenty-five pounds. Anæsthesia. Recovery. Still living.

Note.—This patient has been pregnant since the operation, but through over-exertion miscarried.

CASE XIII.—Operation, 25th of July, 1850; patient, Mrs. M. B., aged 42 years. Greatly prostrated and anæmic from flooding and miscarriage two or three months before, and quotidian fever ever since; relieves suffering by the constant use of large doses of morphia. Incision same length; tumour cystiform, strongly adherent to the small intestines, uterus, bladder, rectum, and whole basin of the pelvis; a part of the cyst was left attached to the colon; several cysts broke while removing them and flooded the intestines, some of them filled with purulent matter; pedicle slender, applied no ligature to it, using torsion; pulse, at the time of the operation, 130, and exceedingly feeble. Weight of tumour, fifteen pounds. Anæsthesia. Recovery. Still living.

Note.—In this case the operation was performed only with the hope of arresting the progress of approaching death. This lady has since become a widow, and again married, and has enjoyed the most perfect health.

CASE XIV.—Operation, 13th of November, 1850; patient, Mrs. J. S., aged 28 years. Had been tapped sixteen times; fifty-six pounds of fluid removed at one tapping; the mass of the tumour was composed of two immense cysts, and weighed eighty-one pounds. She was two months gone in pregnancy at the time of the operation. Incision from a point midway between sternum and umbilicus to pubis; extensive adhesions. Anæsthesia. *Recovery.*

Note.—This patient recovered from the operation, but this was followed by such great irritability of stomach, in consequence of a state of pregnancy, that she could not be nourished, and she died, thirty days after, of starvation. She had previously been reduced to a state of perfect emaciation. There was no miscarriage. The operation was performed in Connecticut. Her physician, Dr. J. Burwell, writes: "Hers was death by anæmia, complete exhaustion from want of nourishment." *Query.*—Would not the production of abortion have been likely to have preserved this patient's life?

CASE XV.—Operation, 16th of April, 1851; patient, Mrs. M. W., aged 29 years. Incision from near the sternum to pubis. Tumour cystiform, firmly and extensively adherent; some peritoneal effusion; pedicle about six inches broad, filled with varicose veins; one very large cyst was filled with partially-washed crassamentum, and could not be diminished in size by the trocar. Weight of tumour, thirty-five and a half pounds. Anæsthesia. *Death* from peritonitis on the third day.

Note.—This operation was performed in the north-west part of Connecticut, and in the midst of that terrific storm that blew down the Boston Light-house. The room occupied by the patient was the best in the house, and yet the wind and rain had free access to it.

CASE XVI.—Operation, 20th of May, 1851; patient, Mrs. T. G. A., aged 45 years. Incision from two inches above the umbilicus to pubis. Tumour extra-uterine, fibrous, non-adherent, weighing six pounds. Pedicle very thick, short, fleshy, and vascular, and attached to the fundus uteri. The omentum and small intestines forced out, remained so during the operation, and were returned with difficulty. Anæsthesia. *Death* from hemorrhage on the third day.

Note.—The anæsthetic agent produced the same effects upon this patient as stated in Case XI.

CASE XVII.—Operation, 20th of December, 1851; patient, Mrs. A. M., aged 42 years. Incision from one inch above the umbilicus to pubis. Tumour extra-uterine, fibrous, firmly adherent everywhere, not removed. During the operation an abscess, deep in the abdomen, was opened, and discharged a quantity of pus. Anæsthesia. *Recovery.* Still living.

Note.—In this case, although the tumour was not removed, the operation was considered to have warded off impending death.

CASE XVIII.—Operation, 3d of January, 1852; patient, Mrs. M. Q., aged 68 years. Incision about seven inches in length. Tumour cystiform, adherent, and weighed twenty-eight pounds. Pedicle very vascular. Anæsthesia. *Recovery.* Still living.

Note.—In this case, in consequence of the great age of the patient, the intense suffering, and rapid prostration, the operation was performed, at the solicitation of the patient, only with the hope of arresting impending death.

CASE XIX.—Operation, 31st of May, 1852; patient, Miss H. S., aged 20 years, exceedingly feeble; constitution broken up, mouth and throat aphthous, appetite wholly destroyed, rapid emaciation, and very frequent small pulse. Incision from one inch below the umbilicus to pubis. Tumour cystiform, firmly and extensively adherent; cysts quite rotten, and filled with purulent fluid; omentum much thickened. Weight of tumour, twenty-five pounds. Anæsthesia. *Death* from exhaustion in thirteen hours.

Note.—With the hope that there was a remote chance of arresting death, I consented, at the earnest solicitation of the patient, to operate, although she was evidently sinking rapidly. The operation afforded entire relief to all pain, and added much to her comfort.

CASE XX.—Operation, 16th of August, 1852; patient, Mrs. E. A., aged 30 years, greatly prostrated and emaciated; stomach rejects all food and medicine; is kept constantly under the influence of morphia; pulse very feeble. Incision from one inch above the umbilicus to pubis. *Both ovaries removed*; right ovary multilocular and medullary; left ovary unilocular, rotten and gangrenous, containing very offensive putrid gas; everywhere adherent. Weight of tumour, about forty pounds. Anæsthesia. *Death* from exhaustion in nine hours.

Note.—In this patient the disease commenced about the middle of March of the same year. The patient was in a similar condition to Case XIX, and was operated upon with the same hope.

CASE XXI.—Operation, 3d of March, 1853; patient, Mrs. M. E., aged 40 years. Incision from two inches above the umbilicus to pubis. Three fibrous tumours, extra-uterine, adherent, weighing four pounds. Two of the tumours had very thick, short pedicles; the other was embedded in the substance of the uterus, and was enucleated. The small intestines were forced out, and with difficulty were replaced. Anæsthesia. *Death* from peritonitis on the third day.

CASE XXII.—Operation, 14th of September, 1853; patient, Mrs. S. R., aged 56 years, enormously enlarged, and a great sufferer. Incision from umbilicus to pubis. Tumour cystiform, extensively adherent; considerable peritoneal effusion; pedicle broad and vascular. Weight of tumour, fifty pounds. Anæsthesia. *Recovery.* Still living.

Note.—The rapid increase in size, the great oppression, weight, and suffering, and the age, in this case, led us to apprehend a rapidly fatal termination, unless arrested by an operation.

CASE XXIII.—Operation, 21st of September, 1853; patient, Mrs. E. S., aged 26 years, very much prostrated, and suffering great agony. Incision from umbilicus to pubis. Tumour cystiform, strongly and extensively adherent; several cysts gangrenous, rotten, and filled with pus. Weight of tumour, over forty pounds. Anæsthesia. *Death*, in twenty-two days, from gangrenous perforation of the jejunum. The opening was about one inch in diameter.

Note.—The disease, in this case, commenced about six months before, and progressed with great rapidity. The vital powers were sinking fast, and the operation was undertaken with the hope of warding off impending death. At the time, gangrenous inflammation was found occupying the right side of the abdomen, yet notwithstanding for two weeks after the operation, there were strong evidences of recovery. Indeed, the wound had healed, the ligatures had come away, and the patient was sitting up. The appearances of the perforated bowel indicated that its vitality had been destroyed at the time of the operation, and that nature had attempted to repair the mischief. It was considered by all present that life had been prolonged by the operation.

CASE XXIV.—Operation, 17th of April, 1854; patient, Mrs. J. C., aged 36 years. Incision five or six inches long. *Both ovaries removed; tumours cystiform, non-adherent, weighing fifteen pounds. Some peritoneal effusion. Both pedicles broad and vascular. Anæsthesia. Recovery. Still living.*

CASE XXV.—Operation, 13th of July, 1854; patient, Miss S. M., aged 31 years. Incision from umbilicus to pubis. *Both ovaries removed; tumours cystiform, very strong, and extensive adhesions, extending to the whole interior of the pelvis. Weight of the tumour, fifty pounds. Anæsthesia. Death on the fifth day, of exhaustion and disease of the stomach and ileum.*

Note.—The *post-mortem* examination revealed extensive disease in this patient. The whole cavity of the abdomen was sprinkled over with tubercular deposits. A large mass of it was attached to the fundus of the bladder. Another mass penetrated the coats of the ileum about thirty-six inches above the valve of Bauhin, and from this point down, the bowel was greatly contracted; above this point the bowels were distended with a yellowish liquid. The stomach and duodenum contained over half a gallon of black liquid, resembling the black vomit of yellow fever. The mucous membrane of the stomach, to half its extent, was discoloured by this black matter, which seemed to penetrate the tissue. It was softened and easily abraded, and the other coats of the stomach were likewise softened wherever this inky discoloration existed.

CASE XXVI.—Operation, 5th of September, 1854; patient, Mrs. W., aged 52 years. Incision four or five inches long. *Tumour cystiform, slightly adherent, weighing twenty-four pounds. Anæsthesia. Recovery. Still living.*

CASE XXVII.—Operation, 30th of September, 1854; patient, Mrs. J. P., aged 59 years. Incision about six inches long. *Both ovaries, and an independent pelvic tumour removed. Right ovary fibrous, of bone-like hardness, and short, thick, fibrous pedicle. Left ovary cystiform and fibrous, having a broad, vascular, flesh-like pedicle. Pelvic tumour fibrous, as hard as bone. Very firm and extensive adhesions. Weight of tumour, twenty pounds. Anæsthesia. Death on the fifth day, from secondary hemorrhage.*

CASE XXVIII.—Operation, 19th of October, 1854; patient, Mrs. S. M., aged 24 years. Incision from above the umbilicus to pubis. *Tumour cystiform, adherent, weighing thirty pounds. Anæsthesia. Recovery. Still living.*

CASE XXIX.—Operation, 31st of October, 1854; patient, Mrs. A. E. L., aged 42 years. Incision from six to eight inches in length. *Tumour cysti-*

form; firm and extensive adhesions. Weight of tumour, thirty-eight pounds. Anæsthesia. *Death* on the sixth day, from secondary hemorrhage.

CASE XXX.—Operation, 16th of December, 1854; patient, Miss D. P., aged 49 years. Incision about five inches long. Tumour cystiform, non-adherent, weighing eighteen pounds. Small intestines forced out and troublesome. Anæsthesia. *Recovery*. Still living.

Note.—The anæsthetic agent produced the same effects upon the patient as stated in Case XI.