Review V.

Clinical Surgery in India. By J. Fayrer, M.D., F.R.C.S., and F.R.S. Edin.; Surgeon, Bengal Army; Professor of Surgery in the Medical College; First Surgeon to the Medical College Hospital, Calcutta, &c. London. 1866. 8vo, pp. 774.

Clinical Surgery in India is a title which recommends itself to us, and we welcome with pleasure the book which bears such a name. We know pretty well what is the state of clinical surgery here in our own country; but it is a fresh interest to us to learn what is the state of clinical surgery in our Indian empire. The various classes of our home population, the conditions under which they live, and the diseases that affect them, are all subjects which are tolerably familiar to us; but when we travel to the far East we meet with different conditions of life, different races of people, different forms of disease from those that we are accustomed to; and these cannot fail to arouse our attention and to excite our interest, in the hope that they may throw some light upon the phenomena of disease, and assist us in solving the difficult problems which life and death present.

In this country the field is comparatively small, and well supplied with husbandmen. There is hardly a village or a hamlet which does not come under the observation of an intelligent medical man. If a case is allowed to go on getting worse, until it has reached formidable dimensions before it is submitted to a medical man, it is not because there is no advice to be had, but because the patient neglects to avail himself of it. But in India the case must be very different. There the number of regularly qualified medical men is very small compared with the area of the country and the amount of the population; and it may easily happen that a patient is so far removed from advice that he cannot obtain it if he would, and thus it comes to pass that diseases are allowed to run a long course, and morbid growths attain a gigantic size before they are brought under the notice of the medical men. Something of the same kind used to occur in this country up to a recent period; in fact, until the facilities for communication increased on the introduction of steam power. We are often told that the present generation does not see such examples of disease as the last generation had to deal with; and the records of surgery certainly seem to bear out this remark. Now, why is this? No doubt because maladies are brought earlier under the care of a medical
man, and under the regular rules of treatment; and what used
to occur in this country until thirty or forty years ago takes
place at the present day, and on a much larger scale, in our
eastern possessions. But this is not the only feature which
gives clinical surgery in India a special interest; not only are
the cases of a more neglected and aggravated character than the
ones which we see in this country, but in some instances it
happens that diseases which are rarely seen at home are quite
common in the east, and that our brethren of the Indian medical
service are able to give us most important information respect-
ing them. For these reasons Dr. Fayrer's 'Record of Clinical
Surgery in India' presents many interesting features, and can
hardly fail to be read with pleasure by the profession at
home.

Dr. Fayrer opens his volume with an address delivered before
the Bengal Branch of the British Medical Association, and
closes it with an introductory address to the students of the
Calcutta Medical College.

Let us first of all, before we proceed to notice any of
the surgical cases detailed, take a glance at these two ad-
dresses, for they belong to the same class, and may well be
grouped together. They were delivered, we observe, before
mixed audiences of Europeans and natives; and they afford a
most satisfactory proof of the progress which medical study has
made in our eastern possessions; and surely the spread of sound
surgical and medical knowledge in a country where nothing but
empiricism existed before must be an unmixed good. We are
sometimes taunted with our conduct towards the semi-civilized
and uncivilized communities, and certainly such taunts are not
altogether without foundation. The means by which the Eu-
ropean has gained a footing in foreign countries have sometimes
been of the most discretable kind; and the way in which he
has introduced his vices, to the manifest injury of the inferior
races, has been disgraceful to his morality. No thought-
ful man, who reflects upon the way in which we have obtained
an entrance into India, to China, or to Japan, can help admit-
ting that such is the case. It is therefore very refreshing to
turn to the opposite aspect of the subject, and to contemplate
the medical science which we have introduced, and the medical
schools which we have planted, and to remember that here at
least we have conferred a real blessing upon the native popula-
tions with which we have been brought in contact. A better
illustration of this could hardly be given than the fact men-
tioned by Dr. Fayrer, that in the year 1864 no less than 1200
bodies were dissected in the medical school of Calcutta, whereas
thirty years before dissection was entirely unknown. This one
fact speaks volumes. It tells us of prejudices that have been
broken down, of the flourishing medical school which exists at
Calcutta, and of the qualified native doctors who are every year
sent forth to carry the blessings of scientific medicine and
surgery throughout the length and breadth of our Indian
empire.

If we turn now to the body of Dr. Fayrer's volumes, with
which we are more immediately concerned, we find that he
deals with many of the most important topics in surgery. A
glance at the table of contents shows us that we shall here find
osteo-myelitis, perineal section, aneurysm, fractures, lithotomy,
abscess, elephantiasis, hernia, amputations, tetanus, and a
number of other interesting subjects, viewed from an Indian
standing-point: and this enumeration of subjects gives but a
feeble idea of the contents of the volume before us; for there are
many short chapters in it which only occupy a few pages, but
which contain cases of great professional interest, and which are
very suggestive to the surgeon. Many of these cases have been
recorded by the native dressers to the Calcutta Hospital, and it
would be difficult to find cases better reported anywhere. The
way in which they have been observed and noted would be a
credit to any of our metropolitan hospitals; and these reports
have been amplified and their value enhanced by Dr. Fayrer's
clinical remarks. The subjects which are considered at the
greatest length are, osteo-myelitis, hernia and its radical cure,
elephantiasis, tetanus, and amputation at the hip-joint; but,
besides these, atresia oris, "nevoid elephantiasis," melanosis,
and a variety of other subjects are briefly discussed. We have
observed that the malignant diseases find but a very small place
in this volume. How is this? Is it a mere accident? or is it
a significant fact, tending to confirm the opinion which has been
expressed by some writers that cancerous diseases are of much
less frequent occurrence in the east than they are in the west?

With reference to osteo-myelitis Dr. Fayrer is of opinion that
this subject has not received the attention which it deserves, and
he deals with it at some length. He points out how frequently
a suppurative inflammation of the bone and the medulla follows
amputations and other operations—how often this seems to give
rise to pyemia; and he advocates, as the only rational and
effective plan of treatment, amputation at the joint above the
seat of disease. These views and this plan of treatment are
illustrated by some well-chosen cases, and there can be very
little doubt that, as far as it goes, it is a sound and reasonable
method of practice. But we cannot help thinking that osteo-
myelitis must be a more frequent and a more severe complica-
tion of operations in India than it is in this country; and per-
haps this may be the reason why it has not received a larger share of attention from European writers. It is possible that the climate of the East, the hygienic conditions of the hospitals, or the constitutional differences between Asiatics and Europeans, may account in some degree for this. But, however this may be, it is certain that in this and in other portions of Dr. Fayrer's work, we have noticed that the inflammatory process, once kindled, seems to run on with great rapidity and vehemence in the class of patients who were the subjects of his operations.

In endeavouring to produce a radical cure in cases of hernia, Dr. Fayrer has used Wützer's method, and a modification of it devised by himself. The modification is very slight, and consists chiefly of an alteration in the shape of the wooden plug which is employed to retain the invaginated skin; so that the principle of the operation is the same as that of the German one. Both of these methods seem to have yielded very fair results; and, as Dr. Fayrer subjected his patients to severe tests before he reported his cases, we are bound to give due weight and consideration to his statistics. By Wützer's method he reports 12 cured and 7 benefited, out of 22 patients, who were operated on. By his own method he reports 24 cured and 6 benefited, out of 38 patients who were submitted to operation. In no case was there any serious symptom, still less any fatal issue, arising from the attempt to bring about a radical cure of the disease. These figures must be considered satisfactory, as far as they go. They are probably as favorable as those which can be quoted in support of any operation of this class; for it seems tolerably certain that we have not yet found means (if, indeed, we ever shall find means) of effecting a radical cure in all cases of this formidable disease.

One of the most interesting chapters in the volume before us is that which relates to elephantiasis. This is a disease which is rarely seen in this country. An hospital surgeon may, perhaps, meet with two or three cases in the course of a long professional life; but in tropical climates it is endemic, and by no means uncommon. Sometimes the disease attacks the genital organs, sometimes the extremities; but it is seldom that both parts are affected in the same individual. Women are subject to it as well as men; but it appears to have a preference for the latter. The aetiology of it is extremely obscure, and the pathology cannot be said to be thoroughly known and understood. It seems to consist of an hypertrophy of the true skin and the subcutaneous areolar tissue, and even the bones undergo an increase in their size and weight. The elements of the skin become exaggerated, forming a coarse fibrous stroma, the interstices of
which are filled with a gelatinous substance; and this increase of size may go on apparently almost to an unlimited extent, until it kills the patient mechanically by the enormous weight which he has to drag about with him. When the disease affects the scrotum, the fibres of the dartos partake of the hypertrophy to a notable degree. The disease is accompanied by attacks of periodic fever, at which times the tumour is painful, and appears to undergo some increase of bulk, so that the more frequent these febrile attacks are the more rapidly it grows.

"Dr. Allan Webb, who has had much experience of this disease, is of opinion that there are two varieties of it; one due to a peculiar intermitting fever occurring twice in the month, at the lunar changes, called by the natives moon-fever. The other variety has for its origin the syphilitic poison, and appears from two months to two years after infection. The first or simple elephantiasis, generally invades the scrotum in men, the labia in women; and the second, or venereal variety, generally begins in the prepuce in men, and the nymphae in women. The tumour of simple elephantiasis is commonly smooth: the venereal variety, tuberculated on its outer aspect. The advent of the simple variety is often ushered in with considerable fever, pain, and swelling. The venereal variety is slow, chronic, and more free from pain and fever. In the advanced stages, when the tumours have acquired great size, they appear to increase alike without pain or fever, by simple growth, or increase of their proper substance."—p. 307.

Dr. Fayrer then gives an account of the way in which he has been accustomed to operate upon the tumours formed by scrotal elephantiasis, and states what have been the results of his own operations:

"Of twenty-eight cases, six have proved fatal; five from pyaemia, and one from exhaustion. In the case of a very large tumour, the operation caused great depression, and, being followed by slight haemorrhage, death occurred from asthenia within six hours. In all these cases the genital organs were preserved, and so far as I am informed, this is always done here, however large the tumour may be."—p. 320.

The aortic tourniquet, which has lately been found of so much assistance in performing large operations about the lower part of the body, does not seem to have been used by Dr. Fayrer in any of his cases. We should think it would be found a very valuable means of controlling the haemorrhage, which is often one of the most alarming complications in operating upon these large scrotal tumours.

Another chapter in Dr. Fayrer's work is occupied with the subject of elephantiasis of the leg, and its treatment by ligature
of the femoral artery. This is a plan which has been recommended by some surgeons, and it is worth trying any remedy to cure so fearful a disorder. But the results which it has yielded in Dr. Fayrer's hands are not encouraging. He has only tried it twice; and in the first case death occurred from pyænia, while in the second the relief obtained was very trifling. When cases of this kind are seen early, a good deal may be done by the use of astringent lotions, bandages, and constitutional treatment; but when they have reached an advanced stage they appear to be very hopeless.

Dr. Fayrer has seen several examples of a peculiar kind of elephantiasis of the scrotum, which he believes has not been described before, and which he proposes to call "nævoid elephantiasis." In these cases the ordinary appearances of elephantiasis are supplemented by a nævoid condition of the vessels, giving the tumour a purple hue and a highly congested aspect. Perhaps this may depend upon purely mechanical causes—upon an obstruction to the venous circulation, leading to a retardation of blood and to a varicose state of the vessels.

Three cases of traumatic tetanus are reported by Dr. Fayrer, all of which recovered. The first was treated by section of the median nerve, as well as by drugs—the second and third were treated by opium-smoking, but also by drugs and ice to the spine. Though, therefore, the results were very satisfactory, they do not enable us to argue much as to the curative treatment of this most formidable disease, for, in each instance, a variety of remedies were employed, and there was nothing very decided in the histories of the cases to show to which of them the recovery of the patient was to be attributed.

We have now noted a sufficient number of points to give our readers an idea of the comprehensive character of this work, and of its clinical value. Surgeons at home will peruse it with pleasure; and those who are in practice abroad ought to admit it to a place on their shelves, for they will often find it of great use to refer to, more particularly in relation to those oriental maladies which are seldom seen by English surgeons, and which are only briefly handled in our treatises on surgery.

We cannot help thinking that the form of Dr. Fayrer's book is unnecessarily bulky. The type is so large, and there is so little of it on each page, that the size of the volume is out of proportion to the matter which it contains; and in these days, when our shelves are already crowded, there is no occasion to add needlessly to the thickness of books. This volume is not the product of an Indian printing-press. It would be more interesting in some respects if it were. It has been printed at home by one of our first publishers, and the illustrations with
which it is adorned are woodcuts made in this country from photographs taken in Calcutta.

Review VI.

Die Krankhaften Geschwülste. Dreissig Vorlesungen gehalten während des Wintersemesters, 1862, 1863, an der Universität zu Berlin. Von Rudolph Virchow. III. Band; I. Hälfte.

On Tumours. Thirty Lectures delivered during the Winter Session of 1862, 1863, in the University of Berlin. By Rudolph Virchow. Vol. III, Part I, pp. 496. Berlin, 1867.

The unexpected publication of the third volume of this book in two separate parts, of which the first has only as yet appeared, renders expedient a separate notice of each of the two parts. For, first, the material contained in this first part is so rich and extends over so wide a field as to supply of itself ample food for study: secondly, the subject of the cancers, which will, we doubt not, be most fully dealt with by the great cellular pathologist, will be more satisfactorily treated of in a separate review: and, thirdly, it would be impossible to do justice to both parts in one paper without trespassing too much on the space allotted to our subject. There is, certainly, nothing that Virchow touches which he does not adorn; and it is difficult to say whether in reading his writings one admires most his great diligence, his rare gift of pathological observation, or his power of inductive reasoning. The only fault that can be found with his writing in the book before us is, that he is too often apt to repeat himself. This, which in the original delivery of the lectures would be an advantage, becomes a fault in the book.

Lecture XXII treats of Struma;—a word used in Germany in quite a different sense to that which attaches to it in England; being there applied generally to what we designate as bronchocele, or the French as goître, and not being in any sense employed as a synonym for scrofula. The plan adopted in the classification of the different varieties of bronchocele is one which Virchow loves to employ in dealing with the morbid anatomy of the organs of the body generally—that, namely, of taking the several component tissues of the organ in question, and classifying the diseases of the organ according to the tissue which is principally involved. Thus, regarding the thyroid gland as made up of follicles partitioned off by connective tissue and everywhere permeated by blood-vessels, we have, basing