

Surgery, Old and New.

I have often heard my mother describe an incident in her early life; it would be between the years 1828 and 1832. She was the youngest daughter, and had much of the care of two brothers, both younger. The one next to her in age developed, when about two years' old, a small lump on the temple. He was a very bright, lively child. The lump was first like a smooth pea, and slowly grew on and on. The doctor attending said he could do nothing as it was too near the brain. As the lump grew the child did not lose intelligence, but merely became an invalid, as the head was too heavy to hold up, and at the last could only lie down, with the huge mass resting on the shoulder. The doctor had a picture painted of the child, but the artist represented him as sitting up playing with a whip, a vein stretched over the tumour. One night it burst, the blood spurting to the ceiling, and before morning the child died. The doctor asked permission to hold an autopsy, which was granted, as my grandfather was a man who desired to do everything to help on science. Seven doctors came to the little old-world Devonshire cottage. I have heard the younger brother say how pleased he was to see the seven doctors' horses at the cottage door, but my mother's recollection was very different. She stifled her sobs and crept upstairs, silently and gently raised the old latch and through the round latch-hole, saw her father standing looking on whilst the doctors worked. She saw the large growth removed, the skull under it smooth and thin; the skull was opened, showing the one half of the brain well developed for a child, the half under the growth shrivelled and compressed, and she heard the doctor's words to her father: "If we had only had the courage to try this could have been removed, like a lump of fat; but, thanks to you, sir, the next patient we have may live."

The child was carried to his grave by his sisters in white, the coffin suspended by white ropes. His picture is in some museum, I do not know where.

Old surgery was conservative and death dealing; the new is daring and life saving.

Still in Devon, but in a cottage hospital instead of a cottage home. A woman came to visit a patient. She spoke of her admiration of hospitals, and surgeons in particular. Her right hand was held stiffly before her, and she wore a black glove. Being a daughter of Eve, I asked her if she had a bad hand, and she said it was artificial. Her hand had been amputated by a great surgeon (she did not know he had been raised to the peerage, and was delighted to hear it. "No one," she said, "deserved it better.")

She had been a lady's maid, and a growth on the wrist had given her trouble for years, and after much treatment she had consented to amputation. Then the surgeon told her he found he could have operated differently if

he had only had the courage to risk it; but he told her in compensation for the loss of her hand that her loss would be gain to others in future. He explained to her what would be done in future to save the limbs of others.

The operation is mentioned in "Walsham's Surgery" as "now known as Lister's operation," and very successful in suitable cases, though rarely performed (p. 255).

It was wonderful to hear the poor woman speak so proudly of her loss. A great man had done his best for her, and in so doing had gained information which would be of value to others suffering as she had done. This knowledge seemed to please her greatly; indeed, she possessed that instinctive reverence for science which is prepared to sacrifice life in its furtherance. E. P.

L.C.C. Lectures to Midwives.

Classes for midwives are now being formed in various centres of London. The lectures are given in the London County Council Schools, in the afternoons or evenings, and the course consists of thirteen lectures, which all registered midwives are invited to attend, for the nominal fee of 1s. for the course. (A list of dates and lectures will be found in our issue of October 21st.) The class is divided into two parts, the first hour for oral tuition, the pupils being encouraged to question the lecturer on any points which they do not fully understand; the second hour in practical demonstration of the subjects treated of in the lecture, such as the handling and use of the instruments carried in the midwives' bag; the passage of the foetal skull through the skeleton of the pelvis; bedmaking; management of the cord after delivery; care of infants' eyes; preparation of enemata and douches; artificial respiration; urine-testing; and the preparation of infants' food. The programme of instruction includes a visit to the College of Surgeons, Lincoln's Inn Fields, when the lecturer will demonstrate the various normal and abnormal conditions of the pelvis and other organs connected with pregnancy and lying-in, and explain the specimens of bacteria which cause puerperal fever.

Dr. Mary Rocke, whose previous lectures at the Midwives' Institute and other centres have already been greatly appreciated, has commenced one of these courses at Kentish Town. She possesses a clear, easy style of lecturing, besides a keen and intuitive sympathy with her audience. Even to those who enjoy every up-to-date facility for increasing their knowledge and practising new methods, these lectures will be helpful, encouraging discussion between experts and beginners, and it is to be hoped that as many as possible will avail themselves of the opportunity thus presented of promoting a more general standard of knowledge and work. N. E. G.

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