

Tuson's Veterinary Pharmacopœa. Fifth edition. Revised and Edited by JAMES BAYNE, F.C.S., Professor of Chemistry at the Royal Veterinary College. London: J. & A. Churchill. 1895.

LENGTHENED criticism of a text-book that has reached a fifth edition would be out of place. It appears to us that the book would be improved by condensing what is given under the head of "Mode of Preparation," and slightly expanding the description of "Actions and Uses." Many of the paragraphs with the latter heading require more careful revision to bring them into keeping with modern views, and to eliminate such terms as "typhoid," "typhous inflammation," and "scrofula." We notice as an important omission that among the actions of iodide of potassium there is no mention of its value in actinomycosis.

Lehrbuch der Vergleichenden Pathologie und Therapie des Menschen und der Haustiere. Von Dr GEORG SCHNEIDEMÜHL, Privatdozent der Tiermedizin an der Universität Kiel. Leipzig: W. Engelmann. 1895.

THIS is intended to be a text-book of comparative pathology in the strict sense of the word, since it will describe side by side the chief diseases of man and the lower animals, no matter whether these diseases are intercommunicable or not. The first part only has yet been issued, and it treats of the infectious diseases. A more lengthened notice of the work will be given after its completion.

## CLINICAL ARTICLES.

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### SOME CASES OF HERNIA IN THE DOG.

By F. HOBDAV, M.R.C.V.S., Royal Veterinary College, London.

THE following cases of hernia in dogs have occurred at the Free Clinique and been operated on with varying success. From these results it would seem that the prospects of a favourable termination are good, but that there is more risk in operating on an aged animal.

Bitches seem much more liable to hernia than dogs, and the inguinal region is the favourite situation. As regards the operation itself there is not much difficulty; it is the sequel (in the shape of peritonitis, collapse, or septic infection) which is to be feared.

CASES I. and II. have already been recorded in the *Veterinarian* for May 1894, and are merely mentioned here in order to add to the statistics of operations and results.

In CASE I. the omentum was removed almost entirely before the bowel could be returned, and the dog appeared to suffer no inconvenience in consequence. On account of the relaxed condition of the inguinal ring a compress of antiseptic tow was applied, and temporarily sutured under the skin in order to prevent the bowel from returning.

In CASE II. the herniated uterus contained a dead fœtus and was much congested; the whole of this was ligatured and then excised, the ligatured ends being returned through the inguinal ring into the abdominal cavity. The bitch did not appear disturbed by the

operation, and drank some milk about an hour afterwards. She was kept in the infirmary and dressed for two days, feeding well and appearing hearty; then, as the owner wanted her home, he was instructed how to dress her and allowed to take her away. As to the ultimate result I am unable to state definitely, although I see no

No. of Case.	Date.	Student Operating.	Breed and Sex.	Organs Herniated.	Anesthetic Used.	Length of Time noticed.	Result.	Situation of Hernia.
I.	Jan. 1894	—	Wire-haired Terrier Bitch	Omentum and intestine	Cocaine	3 or 4 weeks	Recovery in 10 days	Inguinal ring
II.	March 31, 1894	Mr E. Bell	Pug Bitch	Congested and pregnant uterus	Ether	4 days	Not known	Right inguinal ring
III.	Jan. 16, 1895	—	Fox-Terrier Bitch, aged	Almost all abdominal contents	Chloroform	—	Death in 7 days	Ventral hernia
IV.	Jan. 16, 1895	Mr E. F. Wood	Pomeranian Bitch, aged	Intestines and omentum	Chloroform	5 months	Death in 3 days	Right inguinal ring
V.	Jan. 25, 1895	Mr Carter	Fox-Terrier Bitch 2½ years' old very fat	Uterus and fat	Chloroform	—	Recovery in 7 days	Left inguinal ring
VI.	Feb. 9, 1895	Mr Harrison M.R.C.V.S.	Collie Bitch about 5 years	Intestines	Cocaine	Some weeks	Recovery in 15 days	Ventral hernia, left side
VII.	April 24, 1894	Mr Sumner	Mongrel Fox-Terrier Bitch 2 years	Omentum and pregnant uterus	Cocaine	—	Recovery in about 12 days	Left inguinal ring
VIII.	May 20, 1895	Mr Dunne	Fox-Terrier Bitch 4 months old	Intestine	Chloroform	—	Recovery in 9 days	Left inguinal ring
IX.	June 26, 1894	Mr Gazi	Fox-Terrier Bitch	Omentum and intestine	Ether	—	Death 5 days after	Left inguinal ring

reason whatever why it should not have been recovery, as much as Case VII., which was similar.

CASE III. was a case in which the prognosis was very unfavourable on account of the age of the animal and the size of the hernia. The latter was quite as large as an average sized cocoa-nut and not unlike it in shape.

Having been dieted for a couple of days previously, the bitch was placed on her back on the operating table and chloroformed, at 10.30 A.M. The skin was well washed with antiseptic and incised, revealing the hernia to consist of almost the entire abdominal organs, including the spleen, portion of the stomach, the intestines, and distended bladder. The rent in the abdominal wall was very extensive.

The organs were returned into the abdominal cavity, the abdominal

wall was sutured, an antiseptic was applied, and a clam was placed on the skin as close to the abdominal wall as possible, in order to promote adhesion of the skin and necrosis of the parts below.

2.0 P.M. Appeared bright and lively; drank milk.

10.0 P.M. Going on favourably; the portion of the skin below the clam was blue and cold.

17th January. Temperature 101.5°, drank milk, passed normal fæces and urine, lively.

18th January. Temperature 101.5°, going on well; towards evening the mammæ and tissues immediately above the clam became swollen.

19th and 20th January. Temperature 100.4°, lively and thirsty.

21st January. Excised dead tissue below clam, and removed the latter. A small quantity of fœtid pus followed this; syringed wound carefully and inserted a plug of antiseptic tow four times during the day. Bitch appeared lively but very weak; great thirst.

22nd January. Temperature 96.6°, bright but very weak, drank a large quantity of water. Administered beef tea and changed dressing frequently.

23rd January. Died about 9.30 A.M.

*Post-mortem* revealed no signs whatever of peritonitis or enteritis; the sutures in abdominal wall were intact. Death was probably due partly to absorption of toxic products from the wound, or else to excessive weakness.

CASE IV. was a Pomeranian bitch, aged, with a hernia as large as a small cocoa-nut, through the right inguinal ring. It had been noticed by the owner for five months. Having been prepared the previous day, she was placed on her back on the operating table and chloroformed. The hernia was cut down upon, and, after some twelve or fifteen minutes' manipulation, was reduced. It consisted of intestine and omentum, and a portion of the latter was removed. Unfortunately, in returning the intestines a small vessel was ruptured and some hæmorrhage ensued. Three sutures were inserted in the inguinal ring itself, a pad of antiseptic tow was applied to afford the necessary pressure, and the skin wound was sutured, a compress and bandage being applied over all. This was at 10 A.M. The dressing was changed in the evening, and again twice during the next day. She appeared fairly bright but would not eat. Death ensued on the third day.

*Post-mortem* revealed peritonitis, and also the presence of some blood clots in the abdominal cavity from the ruptured vessel.

CASE V. was a very fat fox-terrier bitch, about two and a half years old; she was carefully dieted for a week before the operation, and doses of quinine were administered twice daily for three days previous. On the 28th of January she was secured and chloroformed. The hernia was discovered to consist of both horns and part of the body of the uterus with a quantity of fat. Having carefully separated the fat away, catgut ligatures were placed around the body and each horn, the intervening part being excised. The stumps were then returned through the left inguinal ring into the abdominal cavity. As stitches could not be passed across the inguinal ring, a compress was applied; the skin was sutured over this and bandaged. Temperature taken immediately after the operation was 98.5°.

During the day the wound was again dressed and quinine administered; she drank some milk and ate a little food.

Throughout the next seven days the same treatment was carried out; the temperature never rose above  $101^{\circ}$  except on the 30th, when it was  $102^{\circ}$ ; on the 5th she was sent home with instructions to the owner to continue the antiseptic dressing. She was seen at several intervals afterwards and made a good recovery.

CASE VI.—For this case I am indebted to Mr Walter Harrison, M.R.C.V.S., who performed the operation.

The animal was a collie bitch, and the owner brought her on account of a swelling in the left abdominal region, which had been gradually increasing in size. She was dieted for two days previous to the operation, and received a dose of castor oil.

9th February 1895. She was secured on the operating table on her back, all hair removed from the skin over the hernia, the parts washed with antiseptic and then painted with a 10 per cent. solution of cocaine. After allowing five minutes, an incision was made in the skin and the intestines displayed to view. The rent in the abdominal wall was about 3 inches in front of the stifle, and parallel to the linea alba. By careful manipulation the intestines were returned and the abdominal wall and skin sutured with catgut. Antiseptic dressing and a bandage completed the operation.

After-treatment consisted of opiates given twice daily, together with careful local antiseptic precautions. The appetite was at first indifferent, and only milk was allowed; the first motion was passed on the third day after the operation. A successful termination was brought about in fifteen days, and the bitch has never since shown any signs of a return of the hernia. Temperature was never higher than  $103^{\circ}$ .

In CASE VII. the hernia was about the size of a tangerine orange. The skin around the hernia was thin, denuded of hair and tense. 10 A.M. She was placed on the operating table on her back and the parts painted for five minutes with a 10 per cent. solution of cocaine. An incision was painlessly made through the skin, exposing a small portion of omentum and one horn of the uterus to view. The shape of a fœtus could be distinctly felt; there was no congestion noticeable.

The uterus was incised and the fœtus removed, the parts being carefully washed with antiseptic and the wounds sutured. Even now manipulation failed to return it, and its excision was decided upon. Before doing this I passed my fingers into the abdominal cavity to search for another fœtus, but failed to find one. A ligature was placed around the herniated cornu in two places, and the intervening part was removed. The two ends were then returned into the abdominal cavity through the inguinal ring, a compress of antiseptic tow was applied, and the external wound was sutured and bandaged.

4 P.M. The dressing was changed, and gr. i. quiniæ sulph. administered.

April 25th. Patient bright and fairly lively. Several of the stitches had burst out, and there was a slight serous discharge. Antiseptic lotion was applied, and doses of quinine given twice daily.

On the 29th the owner was allowed to take her away, instructions being given to dress the wound with antiseptic lotion once daily.

She progressed favourably in every way, and on the 11th of May

she gave birth to a fine healthy pup. I saw the owner a few days ago, and he states that both are doing well, and that there is only a very small scar left at the seat of operation.

CASE VIII. was a fox-terrier bitch, about four months old, with a hernia through the left inguinal ring, about the size of a walnut. She was placed on her back on the operating table and chloroformed; the skin was incised and the herniated portion of bowel readily returned through the inguinal ring. This latter was very relaxed and required suturing; silk sutures were inserted, a compress of antiseptic wool applied, the skin sutured over this, and a pad and bandage applied externally.

This dressing was changed twice daily; the little bitch fed well and kept lively, being discharged with only a very slight wound on the 29th.

In CASE IX. the omentum was completely excised in order to allow of the return of the herniated bowel. The inguinal ring was sutured with catgut and a compress of antiseptic tow applied, the skin being sutured over this and antiseptics applied with bandage. The next day the stitches of the external wound had become torn out and were replaced by a quilled suture; the bandage was left off and antiseptic applied. Appetite was fairly good.

28th June. Progressing favourably; the quilled sutures had got torn away, so were not reinserted; the internal sutures were in place. An antiseptic solution of zinci. chlor. was syringed into the wound.

29th and 30th June. Syringed as on the 28th. Bitch feeding well.

1st July, 10.0 A.M. The animal suddenly changed for the worse. Nose was dry and hot, complete loss of appetite, respirations accelerated, pulse 96 and temperature 104.4°.

She suddenly collapsed and died at 3.0 P.M.

*Post-mortem* revealed the wounds apparently healthy, the internal one being completely healed. There were no signs of peritonitis. The thorax contained about 1 or 2 ounces of a blood-stained fluid.

## HÆMORRHAGIC CYSTITIS IN THE CAT.

By HENRY GRAY, M.R.C.V.S., London.

THIS condition is much more frequently seen in the cat than the dog. I have only seen it in the entire or castrated male, and in those aged from eighteen months to two years. All had been great pets, and were either of the short or long-coated breeds. Very little liberty out of the house was allowed. Some have ascribed it to cockroaches.

The first symptoms noticed are those of straining, as if to pass fæces; the animal moans or cries, seems restless, rolls on its side, switches its tail, looks towards its flanks, and the facial expression is sad. The appetite is suppressed, but the cat may drink either a little cold water or a little milk; vomiting may occur, especially if food is forced upon it. It may lie on its side or its abdomen. There is constipation; a very few drops or no urine may be observed to pass. The owner after leaving the poor animal in this misery for a day or two, and observing no amelioration of the symptoms, seeks advice. When called in the practitioner will find, in addition to the above