AN INAUGURAL DISSERTATION,
ON

ANEURISMS

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BY
J. Black
OF
TENNESSEE

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CHARLES W. SMITH,
BOOKSELLER AND STATIONER,
NASHVILLE, TENN.
Aneurisms

None but those who have passed through the ordeal of thesis writing can imagine the feelings and emotions of the student when he sits himself down to the task of composing his essay, a task which is rendered incumbent on everyone who is aspiring to the honors of the degree of Dr. of Medicine. Searching through the whole list of diseases for one upon which he thinks he can possibly compose a passable thesis at last selects the subject and after many investigations of his selected subject in the various authors who have devoted their...
Time to the study of the diseases, he endeavours to collect his ideas and put them on paper, conscious of his utter inability to say anything that has not before been said, knowing his perfect incapacity of ever endeavouring to reason his subject—contenting himself with the mere recalling of the various symptoms and facts pertaining to the disease. Hoping its various imperfections will be viewed with indulgence by the Professors, men who have grown old, whose locks have been bleached by the withering process of time, in the study of their favourite subject—not saying
any thing whatever concerning the utility of thesis writing, knowing that his opinion will be lightly viewed and perhaps with feelings any thing but enviable he composes his essay. Thus I will commence.

Aneurisms - I have selected this subject not because I think I can say any thing pertaining to originality, but because it is a subject that has and ought to interest every medical man. Aneurism properly speaking is a tumour produced by the dilatation of an artery, but the name has been extended to various lesions of arteries as
well as dilatations of the heart, aneurisms have been variously divided by different authors, but the simple division into two kinds viz., the true and false aneurisms, answers the description better perhaps than any other. True aneurism signifies a dilatation of one or all of the coats of an artery, but generally the two external ones. False aneurisms are the ones arising from a wound of an artery and may not have any of the coats involved in the tumor. Aneurisms are also distinguished
by the form they assume, thus for
an example, we may have one
called fusiform from its being
spindle shaped. In aneurism
of this shape all the coats of
an artery are involved. Again
we have one called cylindrical
and is formed by all the coats
as in the fusiform, but the
difference of form arising
from the suddenness or abrupt
bulging or dilatation of the
artery. This is the form most
usually met with in practice.
The next form is that of
the sacculated variety, this is one
where there is a pouch like tumor
formed in the side of an artery,
This form is also frequently met with in practice and is the one in which the cure is effected most readily; the more the pouch-like dilatation the more easily the cure.

Circumscribed aneurism is one where the outlines of the tumor may be defined, it is of the false kind as usually occurring in cases where the blood exudes from the vessel sometime after the receipt of the wound and forms itself a sack in the neighbouring cellular tissue. The diffused is where the aneurism has no sack but looses itself in the surrounding tissue. This as the circumscribed is
of a variety of the puls kind.
The dissecting aneurism has
not until recent years been accu-
rately described by writers. In
this variety, the blood is transpulsed
between the coats of the artery and
burrows or dissects them from
each other. Sometimes throughout
the entire length of the artery,
sometimes the blood after rem-
daining for some length beneath
the coats of the artery finds
its way back into the proper
channel through an opening
in the internal coat, but usually
it bursts through and the blood
is transpulsed in the tissue
surrounding and causes
Slaughtering of the parts. Aneurisms vary greatly in size from that of an almond to that of a tumor several inches in thickness. It frequently happens that more than one aneurism is found in the same individual as high as seven has been found in the different arteries of a person. This is what is to be expected as the disease that produces a true aneurism in one part of the body is liable to occur in the same tissue in a more remote part.

In true aneurism the coats of an artery are weakened by disease and give way to the pressure of the blood flowing through its
inner surface, the enlargement
thus commenced continues to
enlarge unless prevented by the
surrounding parts, there are
two forms of disease similar
to aneurism viz 1st & Steatomatous
condition of one or more of the
casts, 2nd Calcareous deposits between
the casts.
This disease occurs most frequently
in the middle periods of life
seldom met with in children
and only occasionally met with
in the aged and then it most
generally occurs from a calcareous
deposit. As regards sex it is
frequently met with in the male
than in the female. The cause of
This difference is owing to the different habits and occupations of the two sexes. As regards seat of the affection it is most frequently met with in the larger arteries, and more frequently in the aorta than in any other.

The remote cause of the disease is generally obscure but the immediate cause can generally be easily found. Symptoms—are the existence of a tumor in the course of an artery of a pulsating character gradually growing larger as it is observed from time to time. If the hand or finger be placed on the artery, between the tumor and the heart or in other words on the proximal
extramety of the artery. The tumor will be seen to grow less or entirely disappear, and as soon as the pressure is removed it will again assume its former size. You must not rely on the pulsation exclusively as a diagnostic sign of aneurism, as a tumor of a different character may have a pulsative thrill from lying in contact with a large artery or over its course.

The bellows sound is heard when the ear is placed over the seat of the disease. It resembles a blowing sound, not unlike the noise made by a bellows. The thrill of the tumor is distinguished by placing the hand over the tumor. This thrill as well as the bellows murmur
is not characteristic of aneurism as it is found in other diseases, as chlorosis and in some cases of anemia particularly. That state of anemia produced from excessive hemorrhage, aneurism is often accompanied with severe pain, the cause of this is owing to the pressure or tension produced in the nerves by the tumor. In some cases the larger trunks of the nerve are found spread out over the surface of the tumor, conse- =-sequently there is no pain of any consequence felt by the patient, where there is a larger nerve involved in the tumor, the suffering of the patient is very great, and if not relieved will prove fatal in the end
dwelling of an aeclematous character sometimes occur, this is owing to venous obstruction, as when there is a tumor in the course of a large venous trunk.

Diagnosis is generally easily made during the first stages and are disinguished by the symptoms given above, but sometimes there is great obscurity owing to the want of an accurate history of the case. When this is the case you have to take all of the circumstances connected with the case into consideration such as the diathesis. In some cases of this character exploration with an exploring needle will be of some aid in making the diagnosis.

Prognosis, where aneurism is left
to itself it is almost always unfavourable. It continues as a general rule to grow from bad to worse until the tumor ruptures and puts an end to the patient.

The rupture of an aneurismal tumor is not necessarily immediately fatal, particularly when it is near the surface but if these be not remedied they destroy life by their frequent occurrence. Pressure from the tumor of important organs sometimes proves fatal as when the tumor is near the Trachea, sometimes it produces an absorption of bone from the pressure of the tumor, this is the case when you have an aneurismal tumor on the spinal column.

Duration is variable it may continue
long but is sometimes early fatal. Spontaneous cures sometimes occur by a
failure of the seat of coagulation, occasionally a spontaneous cure is brought about by
inflammation causing the sides of the artery to adhere to each other sometimes by the pressure of the
Tumor on the course of the artery, effects a cure. Effusion of blood in the cellular tissue by a rupture
of the tumor will occasionally produce a cure if it does not cause
death from gangrene. A tumor of a different kind may cause a
cure by pressure on the artery so as to cause an abolition of its canal.

Treatment—There are two kinds
of treatment for aneurism, lying and compression, and when neither of these means can not be resorted to you must put the patient in such a position as will be most favourable to a spontaneous cure by position and by proper diet. Compression is often effected and has the advantage where it can be easily resorted to of being safer than ligaturing. In the application of pressure you should be careful not to make it in the whole circumference of the limb as you will produce a disagreeable swelling from the venous obstruction. It should be made immediately over
The course of the artery and at a point on the opposite side of the limb leaving the circulation in the balance of the limb unaffected. Great benefit may be derived by keeping the action of the blood as slow and languid as possible, without impoverishing the system. Nutritious diet as possible without stimulating too much, also keep the mind composed and in some cases take a little blood to unload the vessels which are oppressed by their contents. There is but little said by authors concerning the particular drugs in this disease. Digitalis is sometimes used with advantage also acetate of lead but these are only palliative.