

RICKETTS (B. M.) *al*

Rupture of Left Lateral
Ventricle.

BY

B. MERRILL RICKETTS, Ph.B., M.D.



presented by the author.



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RUPTURE OF LEFT LATERAL VENTRICLE.*

BY B. MERRILL RICKETTS, PH. B., M.D.

On March 26, 1895, I was called, with Dr. Rust, to see a patient who had been suffering for fourteen days. He was twelve years of age, white, and had always been delicate. His father recently died of some tubercular affection.

He had attended school up to the day he took his bed.

He then complained of pain throughout the head. The temperature during the following three or four days reached as high as 101° , when it subsided and remained normal, occasionally being two-fifths or three-fifths of a degree subnormal. The right pupil became widely dilated four days after the onset of the trouble, and at no time thereafter responded to light; the left was in almost a normal condition and sensitive to light. The pulse ran from 120 to 150. Mental condition low, it being almost impossible at times to arouse him. He had taken but little nourishment during all this time, being unable during the last five or six days to swallow. There was no history of injury or middle-ear trouble. He had been a boy of ordinary intelligence. He was lying upon the back—a position which he had taken soon after the onset of the disease. The eyes would occasionally move slowly from side to side, but would not follow any particular object. There was no paralysis of sensation or motion of any group of muscles, although exceedingly slow to respond to any irritation. The expression of the sides of the face was uniform.

His condition gradually became worse, and he died on the following evening.

An autopsy was made at 4.30 P.M. on March 28 by Drs. Robinson, Rust, myself, and student Laughlin.

The emaciation was extreme. The body looked more like that of a boy of eight than that of one twelve years of age. The blood-vessels on surface of brain were highly discolored and distended. None other than the cranial cavity was examined. The entire dura was removed, containing the brain. There was no indication of perforation of any of the basilar bones. There was nothing especially noticeable about the brain until the dura was removed, when a rupture of the brain substance on the under surface of the speno-temporal lobe was noticed. This laceration extended into the left lateral ventricle, which upon being opened was found to contain about two ounces of bloody serum.

*Read before Cincinnati Academy of Medicine, April 22, 1895.



There was a small amount of pus scattered here and there over the under surface of the left hemisphere and upper surface of the cerebellum. Both the gray and white matter around the perforation was so soft that it could not be cut with a knife, being the consistency and color of thin cream. The dura was intact throughout, no thickening or inflammatory action being present. Lymph shreds were observed.

The question now arises as to the cause of the pathological conditions found. The symptoms from the beginning seemed to point to a brain lesion. Fever was present at the time he went to bed, in all probability having existed for several days. The decline of the fever so soon after, and its remaining about normal with pain in the head, are conclusive, I think, of cerebral pressure from some cause. His emaciation and decline were rapid, the dilatation of the right pupil indicating the greatest pressure on the left side.

I believe this is a case where the effusion, whether tubercular or not, took place in the ventricle and caused a rupture of its lower wall into the sphenotemporal lobe.

It is to be regretted that no examination was made of the fluid.

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MEDICINE.

This is the title of a new medical monthly magazine that has made its appearance upon our exchange table, and which we most heartily welcome. It is the result of the enterprise of Mr. Geo. S. Davis, the well known medical publisher, ably seconded editorially by Doctor Harold N. Moyer, of Chicago, and a staff of expert collaborators and contributors, representing the foremost and best medical talent of the Northwest. *Medicine*, moreover, is representative of no college, clique, publishing house, or manufacturing concern, but is merely a high class cosmopolitan medical publication. Such names as Moyer, W. L. Baum, D. A. K. Steele, Hobart A. Hare, G. F. Lydston, W. S. Christopher, S. S. Bishop, N. S. Davis, Jr., J. B. Herrick, G. H. Weaver, H. T. Patrick, M. D. Ewell, Henry Gradle and Norman Bridge associated therewith give abundant assurance of character for the future. The April number presents original articles on "Herpes Zoster Gangrenosus," "Sarcoma of the Kidney in Children," "Cardiac Sedatives," "Prostatic Tuberculosis," "Medical Septicæmia," and "Effects of La Grippe on the Nose, Throat, and Ear." A notable innovation, one we heartily commend, is the absence of "editorials," since it is to be presumed the editor will give expression to his opinions in direct personal contributions.

A journal of such complete independence and high literary standing as *Medicine* has long been needed.

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HAROLD N. MOYER, M. D.,
EDITOR.

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