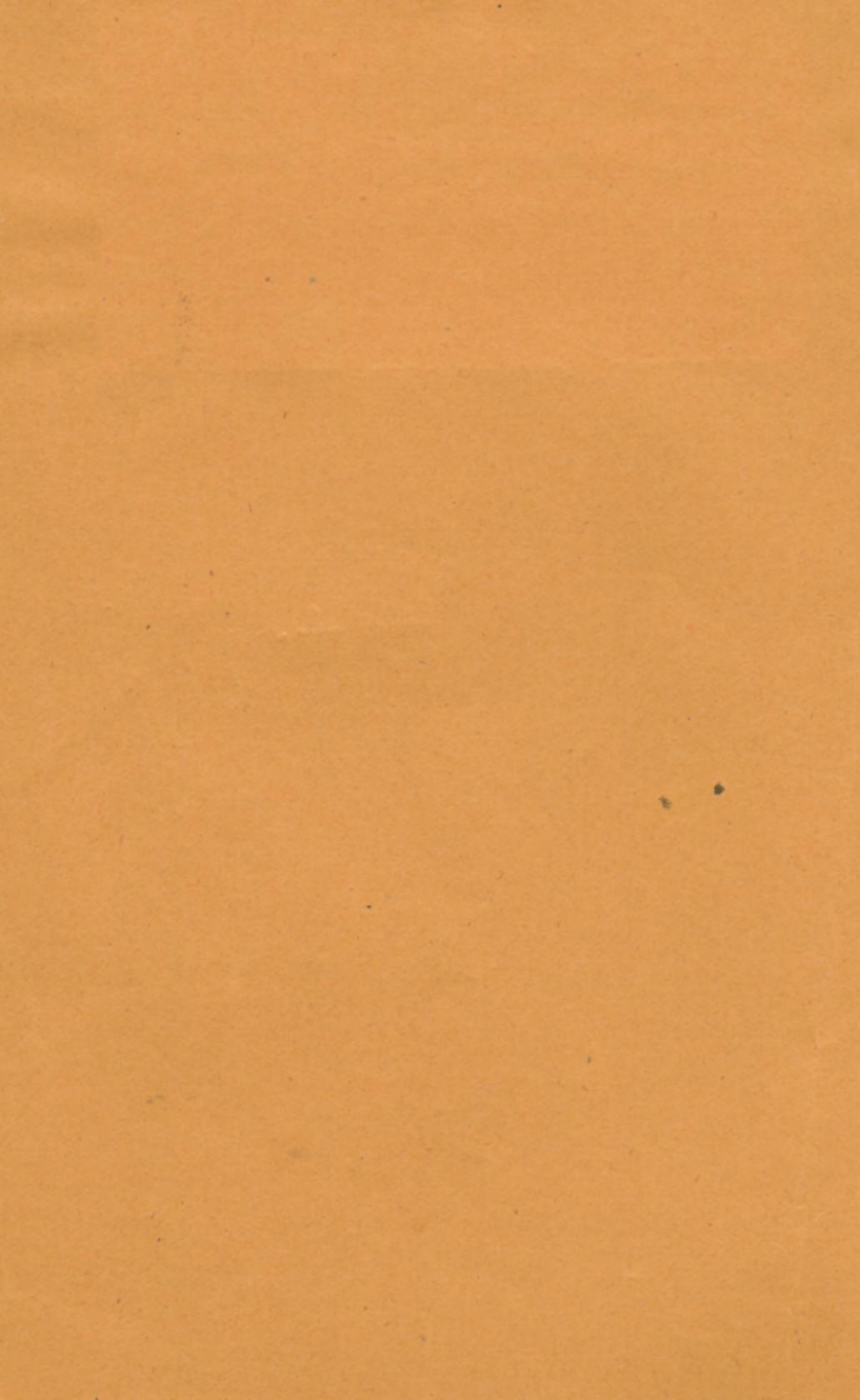


MONKS (G.H.)

The remains of a broken
lead-pencil x x x x x





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THE REMAINS OF A BROKEN LEAD-PENCIL,
(SURROUNDED BY PHOSPHATIC DEPOSITS),
AND THE METAL TIP OF THE PENCIL RE-
MOVED FROM THE BLADDER BY PERINEAL
SECTION.

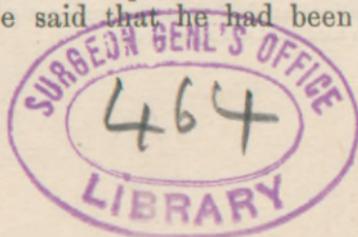
BY GEORGE H. MONKS, M.D., BOSTON.

LAST spring a patient came under my care in the surgical wards of the Carney Hospital, with a violent cystitis, resulting, as he said, from the presence of a lead-pencil in the bladder. He stated that sometime during the preceding October he had pushed a lead-pencil into his urethra for the purpose of "opening the passage for the water to run." He declared that he had suffered with stricture, and that he had introduced the pencil after a vain attempt to urinate. The patient was rather stupid, and he would not or could not give a very satisfactory account of the affair.

The pencil, when introduced, was between three and four inches in length. It was an ordinary lead-pencil, with a piece of rubber attached to one end, while the other was bluntly pointed. The rubber was kept in place by a metal collar.

In some unexplained way the pencil, while in the urethra, escaped from the patient's grasp, and managed to slip into the bladder:— a circumstance which renders the story of the stricture extremely improbable.

Shortly after this, the patient was obliged to seek surgical assistance on account of the intense pain, violent tenesmus and frequent desire to micturate, which resulted. He said that he had been twice etherized



and operated upon, and that he was told after the operations that attempts had been made to remove the pencil through the urethra, that the pencil had been crushed and several fragments removed, including the rubber tip, and that the nickel collar still remained in the bladder, with possibly a few fragments of the pencil itself.¹

Months went by until the patient came to the Carney Hospital. This was in April. He was suffering tortures from pain and tenesmus. The urine was filled with sediment, and its odor was foul. A foreign body,—it seemed like a stone,—was readily detected by the searcher, and it was decided to do perineal section. On April 12th, the patient being under ether, I opened the bladder by the perineal route, the incision being made upon a staff and in the median line.

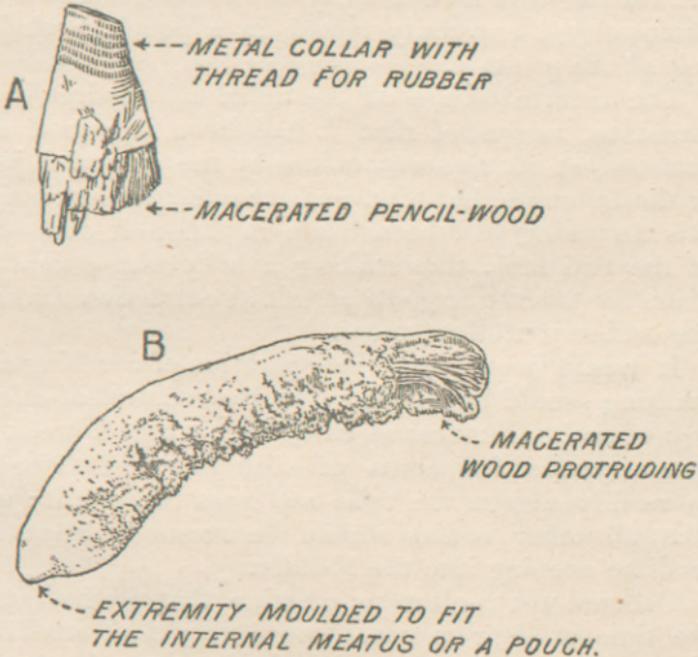
With my forefinger pushed well into the wound I could feel a foreign body; it was rough on the outside like a stone. Owing to the depth of the perineum I had some difficulty in catching the body with forceps and extracting it.

At last I was successful and it was removed. It was a little over two inches long (see Fig. B), was slightly curved and appeared to consist principally of phosphatic deposit. A considerable piece of macerated wood protruded from one end, while the other end was smooth and was moulded into a blunt point. During further examination of the bladder the metal collar was found and removed. This collar (see Fig. A) was distorted, its shape suggesting that of a cocked-hat; and from one end projected macerated wood. The thread on the collar was quite distinct. The cut represents the two bodies in their actual size.

¹ I subsequently learned from the surgeon in charge of the case that his intention had been to make an opening into the bladder later, and remove the metal collar, but that the patient would not submit to another operation and had disappeared.

The bladder was thoroughly washed out, a drainage-tube inserted and a T-bandage applied.

The patient's recovery was rapid and uninterrupted. The bladder was washed out daily with antiseptic solutions, and all signs of cystitis gradually disappeared. The perineal wound healed rapidly and urine began to



flow through the penile urethra. About three weeks after the operation the patient left the hospital with a small perineal opening, through which occasionally escaped a few drops of urine.

REMARKS.

The larger specimen was evidently a heavy phosphate deposit about a nucleus of macerated pencil-wood, part of which I have already mentioned as

protruding from one end of the mass. The smooth, blunt point at the other end was of such shape as to suggest that it had rested either in a pocket or in the internal meatus of the urethra.

Prof. E. S. Wood, to whom the specimen was shown, was inclined to think that the body lay on the floor of the bladder with its convexity downwards, and that the blunt-pointed extremity rested in a pouch, probably behind the prostate.

The distorted shape of the metal collar, already referred to, suggested that it had been squeezed and flattened at its two extremities by the powerful jaws of the lithotrite, but that, *unfortunately for extraction*, this flattening had been made in different diameters at the two ends, thus making a body whose smallest diameter was too large to permit its extraction through the ordinary urethral tubes.

It would seem that the operation of crushing and washing should be restricted to the removal of calculi and of such substances as will, when crushed, break up into separate fragments of such size and shape as to readily engage the tube and pass through it; and that all other bodies should be removed by an immediate opening into the bladder.

I should not neglect to mention that the bodies, at the time of their removal, were very foul smelling. They were kept for three days in fresh running water, and even at the end of that time, the odor about them was distinctly perceptible.

