

# **A HANDBOOK OF APPENDICITIS**

Published @ 2017 Trieste Publishing Pty Ltd

ISBN 9780649172559

A handbook of appendicitis by A. J. Ochsner

Except for use in any review, the reproduction or utilisation of this work in whole or in part in any form by any electronic, mechanical or other means, now known or hereafter invented, including xerography, photocopying and recording, or in any information storage or retrieval system, is forbidden without the permission of the publisher, Trieste Publishing Pty Ltd, PO Box 1576 Collingwood, Victoria 3066 Australia.

All rights reserved.

Edited by Trieste Publishing Pty Ltd.  
Cover @ 2017

This book is sold subject to the condition that it shall not, by way of trade or otherwise, be lent, re-sold, hired out, or otherwise circulated without the publisher's prior consent in any form or binding or cover other than that in which it is published and without a similar condition including this condition being imposed on the subsequent purchaser.

[www.triestepublishing.com](http://www.triestepublishing.com)

**A. J. OCHSNER**

**A HANDBOOK  
OF APPENDICITIS**



MS  
0

*A*  
*Handbook*  
*of*  
*Appendicitis*

By A. J. OCHSNER, M. D.,

PROFESSOR OF CLINICAL SURGERY, COLLEGE OF PHYSICIANS AND SURGEONS, MEDICAL DEPARTMENT OF THE UNIVERSITY OF ILLINOIS; SURGEON TO THE AUGUSTANA HOSPITAL, ETC.



192158  
4. 11. 24

CHICAGO:  
G. P. ENGELHARD & COMPANY,  
1902.

UNIVERSITY OF CHICAGO  
LIBRARY  
CHICAGO, ILL.  
1902

---

---

Copyright 1902  
By A. J. OCHSNER.

---

---

## **PREFACE.**

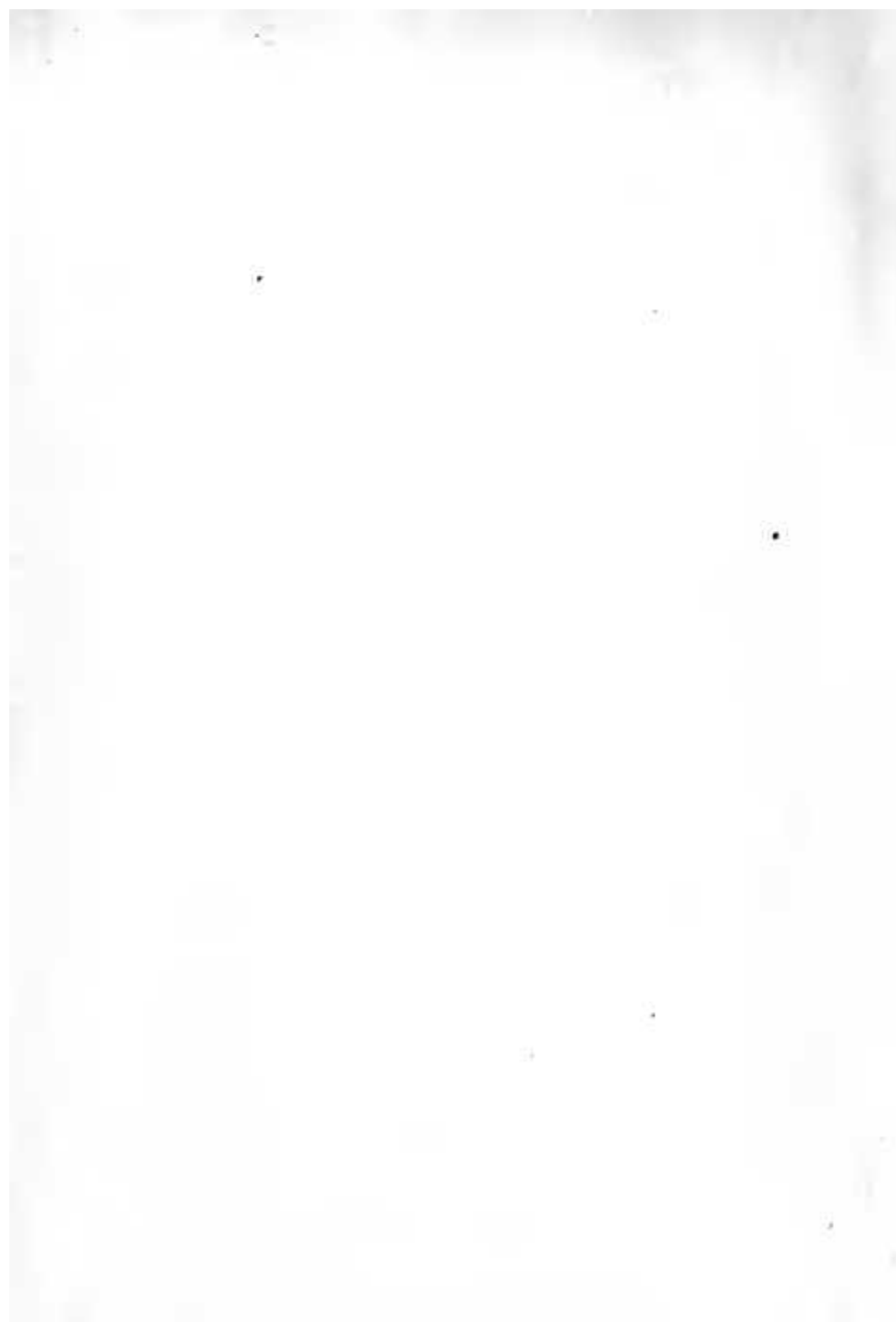
The treatment of appendicitis is still sufficiently new to be worthy of consideration as a special subject.

Its development occurred entirely during my active service in the department of surgery, and being of unusual importance because of the great frequency with which the disease occurs, I have followed its course with special interest.

The following pages contain the conclusions at which I have arrived after a study of much of the literature upon this subject and clinical observations upon a large and varied material.

A. J. Ochsner.

710 Sedgwick St., Chicago.





## CONTENTS.

---

	PAGE
CHAPTER I.	
Introduction and History . . . . .	9
CHAPTER II.	
Anatomy . . . . .	15
CHAPTER III.	
Etiology . . . . .	25
CHAPTER IV.	
Classification . . . . .	44
CHAPTER V.	
Symptoms . . . . .	66
CHAPTER VI.	
Differential Diagnosis . . . . .	81
CHAPTER VII.	
Non-Operative Treatment . . . . .	91
CHAPTER VIII.	
The Surgical Treatment of Appendicitis . . .	125
CHAPTER IX.	
After-Treatment . . . . .	160
CHAPTER X.	
Complications of Appendicitis . . . . .	166
Bibliography . . . . .	
Index . . . . .	177

## ILLUSTRATIONS.

	PAGE
Fig. I.....	132
The various incisions used in Appendectomy.	
Fig. II.....	133
The muscles of the abdomen in relation to the incision.	
Fig. III A.....	134
Showing the layers of tissue and McBurney's incision.	
Fig. III B.....	135
Showing all the layers of tissue in McBurney's incision, with silk-wormgut suture in place but not tied, and the layer of peritoneum and transversalis fascia already sutured.	
Fig. IV.....	138
Showing longitudinal band of cecum and appearance of cecum after peritoneum has been sutured.	
Fig. V.....	139
Showing method of clamping appendix and mesentery and placing purse-string suture.	
Fig. VI.....	141
Showing manner of burying stump of appendix.	
Fig. VII.....	142
Showing interrupted sutures uniting internal oblique muscle.	

- Fig. VIII..... 143  
Showing manner of suturing fascia of external oblique muscle.
- Fig. IX..... 146  
Showing manner of inserting deep silk-worm-gut sutures in closing abdominal incision.
- Fig. X..... 148  
Showing deep silk-wormgut stitches, peritoneal catgut stitches, uniting rectus abdominis muscle in place.
- Fig. XI..... 149  
Showing continuous catgut sutures, uniting strong fascia, aponeurosis of external and internal oblique.
- Fig. XII..... 152  
Showing appendix curled up on lower end of cecum and held in place by adhesions.
- Fig. XIII..... 155  
Showing incision through fibers of internal oblique muscle in order to gain space.
- Fig. XIV..... 157  
Showing closure of wound in transversalis fascia and peritoneum by continuous suture.
- Fig. XV..... 158  
Showing closure of wound in internal oblique muscle with interrupted suture.