

## A P P E N D I C I T I S A CLINICAL STUDY

## CAMBRIDGE

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# APPENDICITIS

### A CLINICAL STUDY

by

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ToMY WIFE

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### PREFACE

This book is essentially a clinical study and aims at giving the student and practitioner a broad outline of the common varieties of disease of the appendix. For this reason its rarer manifestations such as actinomycotic, tuberculous and malignant have been excluded. Whilst no endeavour has been made to elaborate the pathological picture, the macroscopical and microscopical examinations have not been neglected. The former has been carried out in practically every operation case over many years, the latter in selected cases. For the preparation of microscope slides I am indebted to Professor Dean, head of the Department of Pathology in the University of Cambridge. The opportunity given me of examining sections of all types of appendicitis has taught me much, but has made it clear also that I could not do justice to any generalization on a side of the problem which requires a standard of knowledge to which I cannot pretend.

Whilst the statistical basis is founded mainly on cases from private work, these are a relatively small proportion of the cases investigated along similar lines in Hospital work. As, however, these latter were often incomplete and occasionally missing, no use has been made of them for statistical purposes save for the year 1932. None the less, they have played a considerable part in the presentation of both the clinical and pathological pictures. The chapter on Etiology is, with very slight changes, the reproduction of a paper published in the Guy's Hospital Reports, vol. 84 (1934). The chapters on diagnosis and differential diagnosis may be said to have as a nucleus a paper which was published ("Diagnosis of Appendicitis") in The Practitioner, vol. CXXVIII (1932). It is only since writing Chapter III that I have seen the paper on



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PREFACE

"Regional Ileitis" by G. C. Colbeck, Sir Arthur Hurst and G. M. Lintott (*Guy's Hospital Reports*, April 1937, p. 175). The cases reported on pp. 54-56 are undoubtedly of this type.

Sir Arthur Hurst, who was a contemporary of mine at Guy's, has kindly written an introduction. It is a great satisfaction to be sponsored so generously by one who has made British medicine admired and respected throughout the world.

My colleague and friend, Dr Budd, has kindly corrected the proof sheets for me; for help in compiling the index I am indebted to the zealous co-operation of my wife.

My cordial thanks are extended to the Cambridge University Press not only for publishing the book but for their unfailing consideration at all times.

Throughout the preparation of the book I have had the invaluable assistance of my Secretary, Miss Hilda Spalding, and it is a pleasure to have this opportunity of expressing my thanks to her.

W. H. BOWEN

Cambridge 1 September 1937



### INTRODUCTION

By SIR ARTHUR HURST, M.A., D.M., F.R.C.P. Senior Physician to Guy's Hospital

It is a pleasure to write an introduction to Mr W. H. Bowen's book. It is not often that a work is published which should appeal to such a wide circle of medical readers. Surgeons will find much to interest them in the sections on etiology, morbid anatomy and the obstructed appendix. Physicians will welcome a definite statement as to the indications for surgery in chronic appendicitis, with a very convincing analysis of a series of cases in which no recurrence of symptoms has occurred for several years following operation. To general practitioners and to senior students the whole book offers what I think must be the most satisfactory review of the pathogenesis, diagnosis and treatment of acute, subacute and chronic appendicitis in the English language.

Every year I see many patients whose appendices have been removed for so-called chronic appendicitis, often with a second and even third operation for "adhesions", who have gained no benefit or are actually worse as a result of the operation. My former colleague, Dr Terence Turner, described an appendix scar as one of the most constant signs of chronic cholecystitis, and during the past five years I have myself seen patients upon whom appendicectomy has been performed for symptoms which proved to be due to anxiety neuroses, migraine, gastritis, gastric and duodenal ulcers, regional ileitis, renal calculus and Dietl's crises, and, most serious of all, carcinoma of the stomach and colon. I therefore welcome a book which gives a clear definition of what chronic appendicitis really is, and of the evidence required



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#### INTRODUCTION

before an operation should be advised. Few surgeons realize how much physical and mental suffering can result from a useless operation. A man, who, instead of insisting on a preliminary thorough investigation, is ready to say "Let us have a look inside—we can always remove the appendix" should have gone into business instead of becoming a surgeon.

This book should be read by every radiologist, as fallacious radiological reports are responsible for a vast number of useless or worse than useless operations. Mr Bowen's description of the morbid anatomy of appendicitis is sufficiently clear to warn radiologists from diagnosing appendicitis from such signs as unequal filling, kinks and adhesions (both of which are almost invariably errors of observation), and prolonged retention of opaque material. The only radiological evidence of any value is tenderness localized to the visualized appendix, or to its presumed position when, as must often be the case, it cannot be filled. But even this is far from being an indication that the appendix should be removed, and the presence of a kinked appendix is no proof that a carcinoma of the colon, unrecognized by the radiologist, is not present. In this connexion I am glad to see Mr Bowen's plea for a general exploration when a diagnosis of chronic appendicitis has been made. It is a hundred years since Bright and Addison published their admirable description of acute appendicitis as a cause of suppuration in the right iliac fossa. On the surgical side the great Guy's tradition of clinical investigation has been handed on to the present generation by Hilton and by Jacobson and Symonds, whose inspiration it is easy to recognize in the work of Mr Bowen.