Mr. Scallan on a peculiar Ulcer of the Anus.

ART. VIII.—Practical Observations on a peculiar Ulcer of the Anus. By J. J. Scallan, L. R. C. S. I., Lecturer on Relative Anatomy, and Demonstrator in the School of Medicine of Apothecaries' Hall, Dublin.

Extensive as is our knowledge of the diseases of the rectum, there is yet an ulcer of the anus, which, on account of the severity of the symptoms which it produces, and the close similarity which they bear to those caused by fissure in the same locality, it is of importance should be accurately discriminated; that, the affection being truly and early diagnosed, prompt relief may be afforded to the sufferer. This ulcer, it would appear, has not entirely escaped the observation of previous writers, but it is alluded to in such very general terms as make no approach to a precise description; and having had some experience of the protracted suffering which results from the affection not being properly understood, I am induced now to direct attention to it.

In order to the cure of any disease, the knowledge necessary for us to be possessed of is reducible to two great heads—diagnosis and treatment—both equally important, but the former by much the more difficult of acquirement. To the elucidation of these two essentials, I shall accordingly direct my endeavours; first, briefly summing up what has been already written on the ulcerations at the anus, that we may thus, with the greater distinctness, understand the diagnostic marks by which this affection may be recognized.

The ulceration described by Boyer, under the name of fissure of the anus, and subsequently noticed by Dupuytren, as occurring at three distinct parts of this region, each situation causing, according to this author, a difference in symptoms, and demanding a distinct mode of treatment, is a form of ulceration, which here calls for particular notice. Dupuytren, in describing this disease, says, "Elle est accompagnée en general de douleurs si violentes qu'il importe
beaucoup de pouvoir y remédier au plus tot ; les douleurs présentent un caractère en quelque sorte spécial, c’est d’augmenter graduellement et de se prolonger longtemps après la défécation;” but, at a subsequent part of his paper, he excepts from this description two of the three forms of fissure which occur here; for, in speaking of that which is found below the level of the sphincter, he says, “Elles genant peu la défécation, n’occasionnent point de constriction du sphincter et par conséquent sont fort peu douleureuses;” and again, of these above the level of the sphincter, “Elles causent lorsque le malade va à la selle tenesme difficile à décrire qui cesse aussitôt après l’excrétion.”

Sir B. Brodie, in describing the preternatural contraction of the sphincter muscle, mentions, that we will sometimes meet with a small superficial ulcer immediately in front of the coccyx, the presence of which he refers to the irritation of the faces, delayed in their passage by the contraction of the muscle. This form is but an accidental complication of the disease described by him as a “preternatural contraction of the sphincter muscle.”

The same author proceeds to describe an ulcer at the anus, unaccompanied by preternatural contraction of the sphincter, which, so far as the latter circumstance is concerned, is identical with the ulcer about to be described, and a similar form of ulceration is noticed by Mayo and Copeland.

In the fifth volume of the Dublin Hospital Reports, an ulcer is described by the late Dr. Abraham Colles, which bears, in many particulars, a perfect similarity to the disease under description, though, in my mind, it is not quite identical with it.

In the twelfth chapter of the late Mr. Bushe’s work on diseases of the rectum, we find him express himself in such a manner as leaves no doubt of his having seen the form of ulceration which it is my wish to describe; but he does not enter into any description of it. “In a sound constitution,”