G. Buchanan on inguinal hernia treatment: A Review 111-years after

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Summary

The Scottish surgeon G. Buchanan (1827-1905) has contributed to the development of pediatric inguinal herniorrhaphy in line with Listerian principles, and is the author of the first separete publi-

cation on the subject to appear as early as 1879. His largely forgotten work is being reassessed.

Key words: Buchanan - Hernia history

"On the 25th of June, 1855, I rose at five a.m., and went on deck. All was life on board. The apathetic Turks who had been lying huddled together, presented the appearance of a huge mass swaying to and fro, as they got up from their recumbent posture to get a glimpse of the great city. The Franks on the quarter-deck were getting up on the companion or the gangways, or any point from which a view could be obtained. All was vivacity, all eagerness to catch the first view of the pinnacles of Constantinople" (İstanbul) (1).

These are the first words in Mr. George Buchanan's diary, written on his landing in Istanbul for his mission as civilian surgeon in the expedition to the seat of the Crimean War. He had just completed his medical training at the Andersonian University in Glasgow, where his father held the chair of Professor in Anatomy; they were renown for their demonstration of the effectiveness of chloroform as an anesthelic, with the father operating on the son. Buchanan served for a period at the barrack hospitals established in Üsküdar (Scutari), under Miss Nightingale's administration after his first trip to the front, but was afflicted with a "Crimean fever", shortly. Following his recovery he attended the hospitals on the Dardanelles, and returned to Scotland by the end of the year to succed his father (2).

Prof. Bucchanan and Lord Lister and Sir Macewen

The Old Royal Infirmary of Glasgow is honored to be the birthplace of antiseptic surgery in the hands of Joseph Lister ⁽³⁾. George Buchanan was one of his colleagues by then, and readily adopted the techniques developed mainly in the practice of orthopedic surgery there. Interest in the surgical hernia was rekindled with the advent of asepsis, and Lister's personal operation of case of groin hernia (1869). Edorado Bassini was among the many who payed visits to Lister's clinic before they tried their hands in herniorrhaphy ⁽⁴⁾, and William Macewen, another pupil of his, conceived the "kelotomy" ^(5,6) esteemed to be the best operation prior to classical repairs ⁽⁷⁾.

G. Buchanan's contribution to this development came with the surgical treatment of inguinal hernias in children; he devised and performed a technique for this age group in particular, and presented his results in a separete report (8), one of the earliest to appear in the literature of the subject (Fig.). Buchanan completed his long and productive career as the inaugural Professor of Clinical Surgery at the Western Infirmary of the Glasgow University (9,10), yet his role with respect to a definition of pediatric herniorrhaphy was eventually overshadowed by his manifold academic activities (11).

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OPERATION

FOR THE

RADICAL CURE

CONGENITAL INGUINAL HERNIA

IN THE CHILD.

GEORGE BUCHANAN, M.A., M.D.,
Professur of Clinical Surgery in the University of Glasgow.

WILLIAM MACKENZIE:
48, 45 HOWARD STREET, GLASGOW: AND 69 LUDGATE HILL, LONDON
1879.

Fig. Title page to G. Buchanan's booklet (1879)

Buchanan's Herniorrhaply

J. Wood's operation was the model for herniorrhaphies of the day, and Mr. Buchanan had attempted to treat children with this method of placing pins subcutaneously. He was dissatisfied, and took to develop a personal technique with this experience: in dissecting the hernial sac through the external abdominal ring, except for a strip of tissue adherenet to the spermatic cord posteriorly, he transected the liberated portion of it's circumference, leaving the cord untouched, virtually in situ. Subsequently, the distal part of the sac was folded over the testicle, while the proximal portion was rolled upwards into the internal abdominal ring. This plug or "tampon" developed from the aspects of the sac was, in turn, transfixed with a pair of sutures passing from the lateral side of the inguinal canal to the body of the M.Obl.Abd.int. Finally, the external abdominal ring was approximated with a third stitch. Buchanan used carbolized silk threads for his repair, and a silver wire for the external ring to start with, but chose chromized catgut after that, only to obtain remarkable results in children (12). He did, however, continue to use trusses before surgery, and immobillized his younger patients for some time postoperatively. A problem met with such baffle operations was a compression of the cord (5,13); yet, conceivably, Buchanan could avoid these complication by excluding all structures lying posteriorly within the canal from his dissection.

A number of points in this technique deserve mention as they relate to the further implementation of pediatric herniorrhaphy:

- (i) the utmost protection of the spermatic cord and adjacent structures (14);
- (ii) section of the sac (herniotomy);
- (iii) an approximation of the M.Obl. Abd.int. to the External Oblique aponeurosis and Poupart's ligament to cover the internal ring, and secure obliteration with the inverted portion of the Processus vaginalis (15);
- (iv) narrowing of the external ring only -as opposed to M. Banks and Czerny's whole length "Miedernaht" (bodice suture);
- (v) use of chromized catgut alone for the complete procedure.

George Buchanan should be remembered as a pioneer in addressing inguinal hernia surgery specifically in children, and his introduction of a refinement in the technique, supplemented with an explicit presentation of his case.

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