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SARCOMA OF THE SKIN OF
THE BACK IN A BABY.

By WALTER LESTER CARR, M.D.,
New York City.

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W. L. Carr



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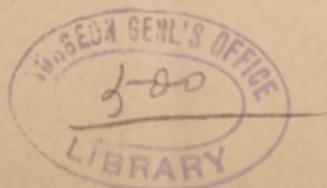
F. McK.—Female, aet. 7 months, second child of healthy parents, was brought to the Out-patient Department of St. Mary's Free Hospital for Children on January 27th, 1893, to be treated for a growth on the back.

The family history was negative; both parents were healthy Irish, and denied that tuberculosis, scrofula, syphilis or cancer had ever existed in them or their relatives.

The mother stated that the growth was first noticed when the baby was three months old, and at that time, four months before she came to the hospital, it was much smaller and somewhat reddened. The baby had not been ill nor had anything injured her. On further questioning, however, the mother said that before she was cognizant of the tumor the baby was troubled greatly with the "prickly heat."

The baby was a well nourished infant, rather fat, with the skin in good condition. The tumor was found to be

* Read before the American Pediatric Society, West Point, N. Y., May, 1893.



located on the right side of the back between the inferior angle of the scapula and the lower ribs.

The growth had a yellowish, flattened surface, a centre slightly depressed, and around the edge a marginal zone of small blood-vessels. It was raised about three-eighths of an inch above the skin and extended seven-eighths of an inch in one direction and an inch and five-eighths in the other; the shape being an irregular ovoid.

It was moveable from the underlying structures and evidently was not deeper than the cellular tissues. There were no other growths or enlarged glands in any part of the body.

After ten days I observed two small nodules just below the tumor and decided to operate at once, although there was no apparent change in the original growth.

With the assistance of Dr. E. C. Mowry I removed all of the diseased tissue, which was found not adherent, except in one place where it was attached in a loose way to the muscle as if extension of the growth were just beginning.

The edges of the wound were brought together with cat-gut, the parts were dusted with iodoform and dressed with iodoform gauze. The union was complete in four days. There were two or three drops of pus around a cat-gut ligature applied to a small vessel, but it did not interfere with the healing of the wound.

May 20th.—I examined the site of the tumor and found the cicatrix and surrounding tissues soft and healthy. No new growths were to be seen and the glands were normal.

I am indebted to Dr. R. G. Freeman, pathologist to St. Mary's Hospital, for the following report, which I quote *verbatim*:

"The tumor is a spheroidal celled sarcoma of the skin. It consists of a connective tissue basement substance and of cells, mostly spheroidal, and a few spindle-shaped cells. The tumor is fairly circumscribed and, for the most part, its deeper portion is surrounded by a layer of connective tissue; in places, however, this is wanting and the cells are extending into the subcutaneous fat."

