INSTRUMENTS FOR USE THROUGH CYLINDRICAL RECTAL SPECULA, WITH THE PATIENT IN THE KNEE-CHEST POSTURE.

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For examining the rectum in its different portions from the anal orifice up into the sigmoid flexure, I have had a great variety of specula made, from the very shortest, not much over an inch in length, to the longest, about thirty centimetres; the diameter of these specula varies from about four centimetres down to one and one-half and one centimetre. The smallest sizes are necessary in examining through strictured areas. I have thus had upward of forty specula made altogether, many of them being devised simply to fit particular cases.

My method of examining and treating the rectum under air inflation, naturally induced in the knee-chest posture by elevation of the pelvis, has also brought with it the necessity for certain auxiliary instruments for removing pieces of tissue, for swabbing, for treatments, etc.

Some of the instruments I have gradually accumulated
for these purposes are the following: a scoop, a packer, a
powder insufflator, alligator forceps, tenacula, tenaculum for-
ceps, scissors, and knives.

These instruments all necessarily have two features in
common,—a handle, about eight or ten centimetres in length,
bent downward at an angle of 45 degrees from the instrument
proper, and a shank long enough to be used through the longer
specula, that is to say, from fifteen to twenty-five centimetres
in length.

The rectal scoop (Fig. 1). The scoop is a little spoon on
the end of one of these long handles, bent at an angle of about
70 degrees to the shank of the instrument, in a direction oppo-
site to that of the handle, used to clear the bowel or the lumen
of the speculum of any faecal masses which enter it.

Fig. 2.

Packer.

The packer (Fig. 2). The packer is simply a blunt fork
like my vaginal packing instrument, used for carrying cotton
or long strips of gauze through the speculum and packing it
into the bowel, so as to make a prolonged application to a dis-
eased area. Sometimes I tampon or fill up the rectum for
several inches in this way, leaving a string hanging outside of
the bowel by which the tampon can be withdrawn. At other
times I leave the tampon in situ without any string, expecting
the foreign body to be passed when the bowel is moved natu-
really. Cotton tampons often pass without the patient being
aware that the evacuation is other than a normal one.
Powder shovel (Fig. 3). The powder shovel is used with an insufflator to convey powder up into the bowel beyond the end of the speculum. The powder is then diffused over the diseased surface by insufflation, through compressing a rubber ball attached at the end of the tube.

Alligator forceps (Fig. 4). The alligator forceps resembles those used by throat specialists, only they are larger, the jaws being two and one-half centimetres in length and four millimetres in width. These are provided with teeth at the end to hold the tissue grasped.

Tenaculum. The tenaculum is simply a uterine tenaculum about twice the ordinary length. It is valuable in transfixing and lifting up a bit of tissue to be removed by the scissors.

Scissors (Fig. 5). The scissors are made with a bent handle like the other instruments and with long shanks about twenty centimetres to the lock; they work in a vertical direction. In one pair of the scissors I have had the cutting surface made about three centimetres in length, with fine saw-teeth on each blade. These are invaluable in snipping off little pieces of suspected tissue for microscopic examination.
INSTRUMENTS FOR USE IN THE RECTUM.

Tenaculum forceps (Fig. 6). The tenaculum forceps is made to work like the alligator forceps, and serves to pick up cotton or catch any other foreign body lodged high up in the rectum.

**Fig. 5.**

Saw-teeth scissors.

Knife. The knife is also made in the way common to all, with a delicate blade one and one-half centimetres long by three millimetres in width, turned upward at an angle of about 35 degrees.

**Fig. 6.**

Tenaculum forceps.

I have also devised a needle, on a long arm like the other instruments, with an eye in the end for the purpose of carrying a piece of silk through the pedicle of a polyp at any point in the bowel above the ampulla, with the expectation of catching the silk and drawing it out of the eye with the tenaculum after the transfixion. The needle should then be withdrawn and the ligature tied, making counterpressure at a point beyond the tumor with the fork of the packing instrument.