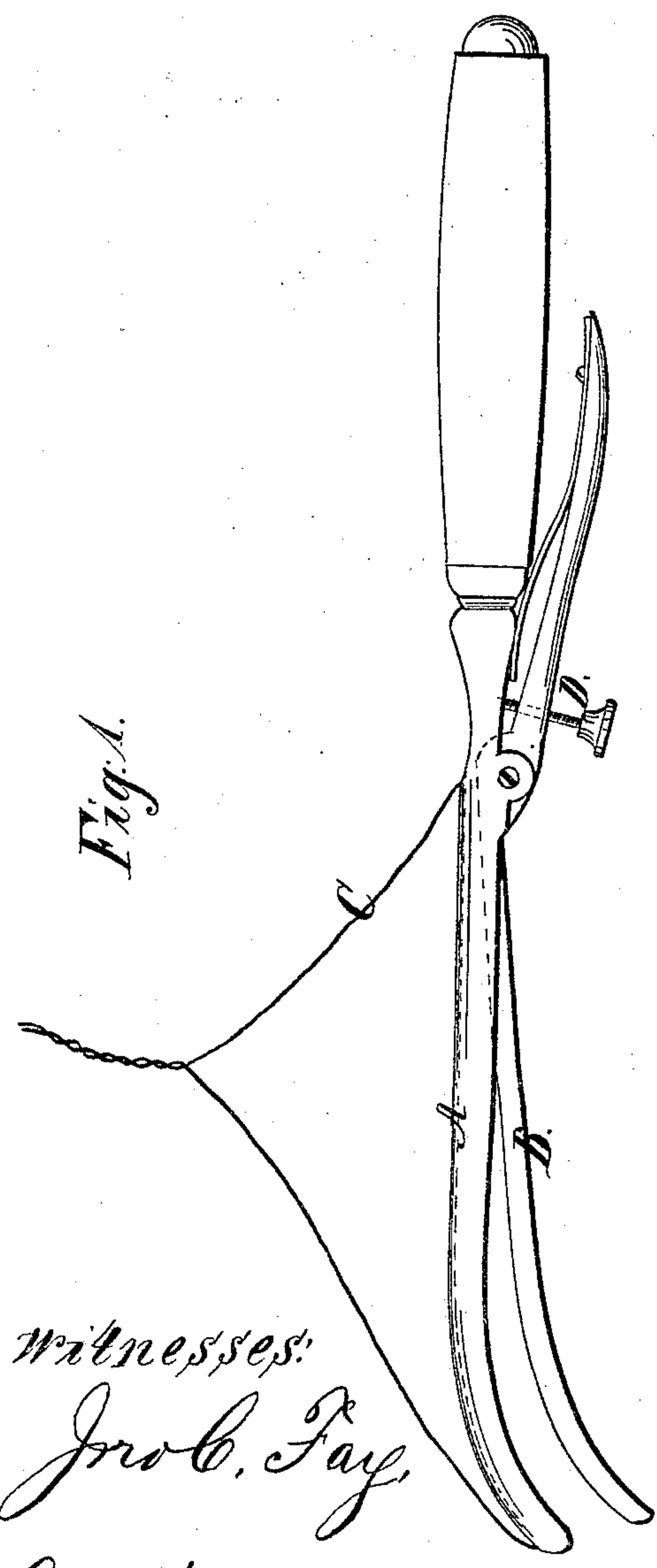
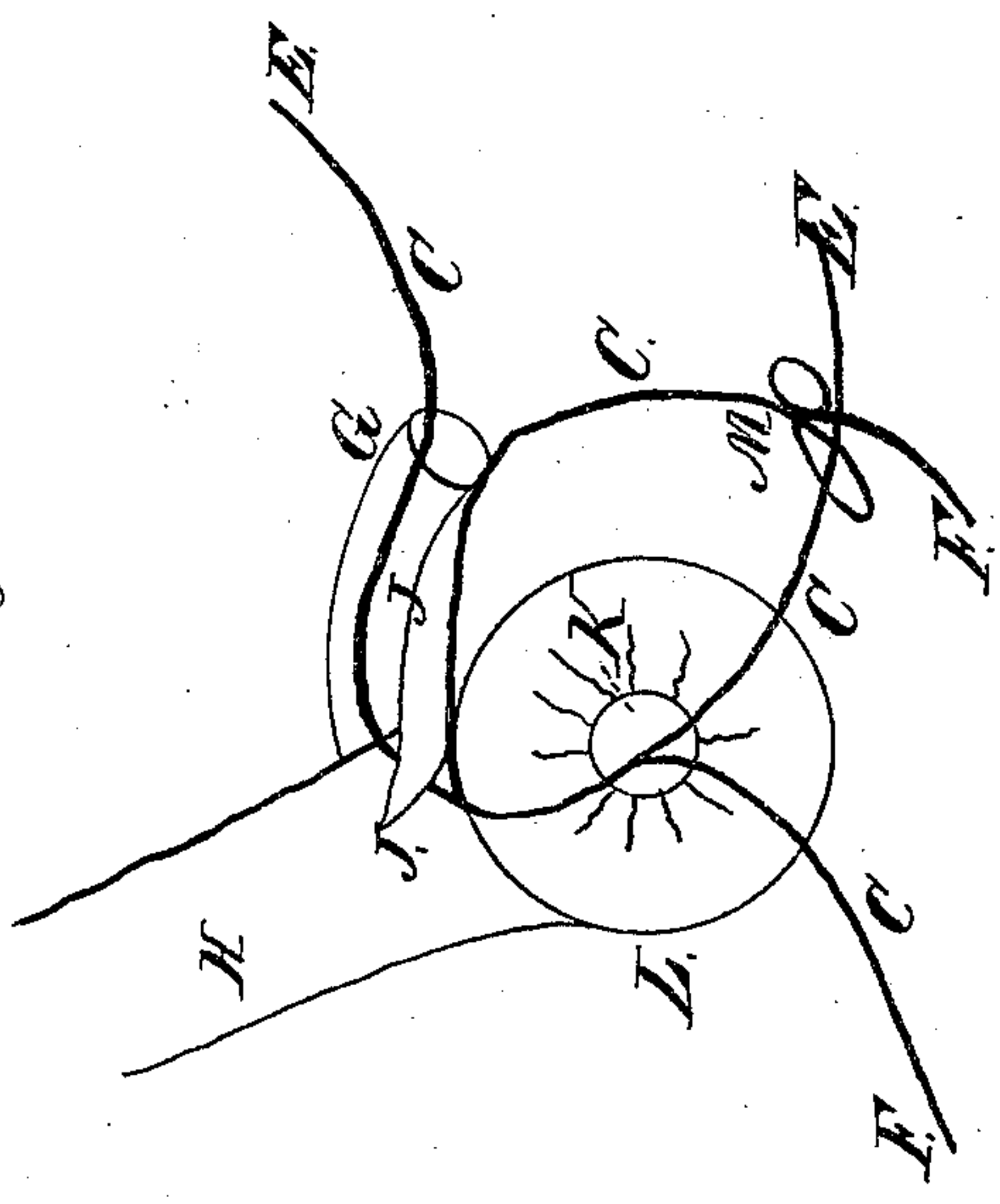


*C. C. Brown,*  
*Treating Fistulous Ulcers.*  
*N<sup>o</sup> 50,330.      Patented Oct. 10, 1865.*

*Fig. 1.*



*Fig. 3.*



*Fig. 2.*



*Inventor:*

*Chas. C. Brown M.D.*

*Witnesses:*

*Jos. C. Fay,*

*Daniel R. Barrett,*

# UNITED STATES PATENT OFFICE.

CHARLES C. BROWN, OF WASHINGTON, DISTRICT OF COLUMBIA.

## IMPROVEMENT IN BISTOURIES.

Specification forming part of Letters Patent No. 50,330, dated October 10, 1865.

*To all whom it may concern:*

Be it known that I, CHARLES C. BROWN, of Washington, District of Columbia, have invented a new and useful Surgical Instrument for Operating in Fistulas, Pipes, Strictured Passages, &c.; and I do hereby declare that the following is a full, clear, and exact description of the construction and operation of the same, reference being had to the annexed drawings, making a part of this specification, in which—

Figure 1 is a side view; Fig. 2, a transverse section.

Fig. 1: A is an inflexible metallic director, curved at one end, with a handle attached at the other end, having a concealed aperture through the superior surface, and a groove upon the inferior surface. B is a movable blade attached near the handle of director fitted to the groove on the under side of the director A, the lower side being the cutting-edge of the blade, extending from the point to the pivot or hinge, and when the blade is closed in the groove of the director the instrument is inserted into the pipe or rectum. The ligature C is made of saddler's sewing-silk or any other suitable material, and before the instrument is inserted into the pipe or rectum the ligature is inserted and passed through the long aperture, (that extends along the top of the director A,) with its ends above, the ligature C being above, so that when the incision is made by the curved blade B beneath, the cutting-edge does not come in contact with the ligature to cut or sever it, but the ligature is passed through the pipe or rectum and outside of the anus, and the instrument is then withdrawn. After the incision has been made the ligature is then left resting on the lower side of the pipe or rectum and in the incision and tied below, keeping the muscles of the incision separate for a few days, until the inside or interior of the pipe has healed and all its matter and humors passed off through the incision, when the ligature is untied and withdrawn, and the incision soon closes and heals, as shown at Fig. 3, which exhibits the ligature C, with its outer ends, E and F, pipe G of the fistula, rectum, or lower gut, H, incision J, anus K, wall or outer edge, L, of the anus and

ligature C as looped or tied beneath at M. Thus the operator inserts the closed instrument and ligature into the orifice of fistula G, while an assistant holds the upper and back end, E, of the ligature C. The director A, with its ligature extending beyond the point of the director, is passed into and through the rectum H and downward until the end F of ligature C is carried through the anus K and held by the left hand of the operator. The ligature C is then above the director A, and the incision J is made of the size required without cutting through the wall L of the anus. The end F of the ligature C is then held firmly, and the instrument is then withdrawn, and the two ends E and F are then drawn and tied together at M, which keeps the ligature C resting in the incision J until all above it is healed, after which the ligature C is withdrawn and the incision J closes and heals.

The back end of the blade B operates on a pivot, and has a spring at the outer rear end to regulate the cutting operation by the pressure of the fingers of the operator, while the screw D is the gage to limit the extent of the incision required.

Fig. 2: A is a transverse section; B, the groove; C, the aperture.

The benefits arising from the instrument are—

First. The introduction into the pipe or passage is less painful than the introduction of the unsheathed knife.

Second. It limits the locality and extent of the incision in the passage, stricture, or pipe in which it is used.

Third. It may be used with safety in cases of lithotomy, stricture of the rectum, and in all other cases where a concealed incision is desired.

What I claim as my invention, and desire to secure by Letters Patent, is—

The construction of the director A, provided with a groove for the reception of a ligature, C, as and for the purpose herein set forth.

CHAS. C. BROWN, M. D.

Attest:

A. L. WALLAR,  
D. K. BARRETT.