

29. *Pseudarthrosis cured by the method of Celsus*.—PROF. BIAGNINI relates in the *Giornale di Scienze Mediche di Napoli*, a case of oblique fracture of the humerus in a young man, in perfect health, in which bony union not having taken place after forty days, friction of the ends of the bones was resorted to, but without success. Thinking that sufficient irritation was not occasioned by a single resort to this means, Prof. B. then repeated it three or four times at intervals of a day, and then reapplied the fracture apparatus. In forty days after this treatment, the bone was firmly consolidated.—*Gaz. des Hôpitaux*, Nov. 25th, 1847.

30. *Solution of Sulphate of Iron in Prolapsus Ani*.—MR. VINCENT, in his interesting volume entitled "*Observations on some of the Parts of Surgical Practice*," states that of late he has found such great advantage in employing the sulphate of iron in prolapsed bowel, that the operation may very often be dispensed with, and the patient cured merely by the use of this remedy. Very lately he has had two cases of the worst sort, one of twenty years' standing, with great protrusion and abundance of bleeding piles, which in three weeks was completely cured. The other came from one of the institutions which offer great pretensions in the treatment of these cases. The patient was very bad, having both internal and external piles, and the bowel descended largely and most readily; he was completely relieved in about a month. Other cases of a slighter kind have been set to rights in a week. The patient should be kept in bed, so that the bowel may be as much as possible in repose, and after it is cleansed out, a small quantity of the injection should be daily thrown up, and retained. Balsams are also well adapted to the disease.—

31. *Foreign body in the Ear*.—A case is noticed in the *Gazette des Hôpitaux* (Oct. 5th, 1847) of a child, in the external meatus of whose ear a bean had been introduced. A surgeon, after trying for more than an hour with various instruments without success to extract it, finally thought of trying injections, as so strongly recommended by our correspondent Dr. J. M. Sims (see No. of this Journal for April 1845, p. 336). The reflux of the fluid at the very first injection, ejected the bean.

32. *Case of Ununited Fracture treated by Galvanism*.—MR. BURMAN relates, in the *Provincial Medical and Surgical Journal* (Dec. 1, 1847), a case of transverse fracture of the lower-third of both tibia and fibula, in a man 35 years of age, of robust constitution, and temperate habits, which came under his care fourteen weeks after the accident. There was at this time no formation of callus; the fractured ends were quite movable, and there was no inflammatory action about the parts, although the two ends of the bone had been assiduously rubbed together. Mr. B. had a kind of *boot* made for the patient, of turned sheet iron, which, when applied, embraced the whole leg, ankle and foot. This Mr. B. had well adapted to the limb by means of padding, so as to prevent any lateral motion, an object which was the more readily accomplished, as the fracture was perfectly transverse, and that part of the *boot* which was directly over the fracture was made to turn back upon a hinge, so that the injured part, without in the least disturbing the limb, could at any time be got to.

With this apparatus, firmly fixed, and assisted by a pair of crutches, he was directed to take daily exercise in the open air; to partake freely of wine, porter, and animal food; and when sitting in the house, or lying in bed, to have the fractured ends firmly pressed against each other, by means of a broad band passed over the knee, and under the foot-board, capable of being tightened by a strap and buckle, the leg being bent, at the same time, at a right angle with the thigh. This strap was to be removed, and the limb to be permitted to hang down, and partially used, when taking out-door exercise. In addition to this, for nearly half an hour every day, an electro-magnetic current was made to pass directly through the fracture, by means of needles attached to the two poles of the apparatus, their points being inserted just under the skin, one on each side of the fracture. This plan of treatment was commenced on the 9th of October, 1845; by the 22d, sufficient inflammatory action had been set up, to render the further application of galvanism unnecessary; and by the 30th, the deposit of callus was so copious, and

the union of the fracture so firm, that at the patient's earnest solicitation, Mr. B. gave him permission to return to his duties, directing him still to wear his boot, and to continue the use of his crutches.

The first week after this, the patient threw aside one of his crutches, the next week, growing tired of his boot, he threw it aside, together with his other crutch, and when seen by Mr. B., some considerable time after, the fractured leg was as firm as the other.

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## OPHTHALMOLOGY.

33. *Destructive Ophthalmia, with extensive Suppuration of the Cellular Membrane, and severe affection of the Knee-joint, occurring after Premature Delivery.*—By A. M. M'WHINNIE, F.R.C.S. (*Proceedings of Royal Med. Chirurg. Soc.*, Jan. 11.) In the early part of last spring, the author was requested to visit Mrs. M——, a lady, aged 40, of spare habit of body, but strong constitution and active mind. She had suffered several previous miscarriages, and had now been delivered, on the 7th of March, of a four months' child, which had been for some time dead in the uterus, and it was believed that the system was contaminated by the retention of the decomposed fœtus. Much serious indisposition and constitutional disturbance preceded and followed the expulsion of the fœtus, and which manifested themselves locally on the second or third day after delivery, by inflammation of the contents of the right orbit: it was found that the globe was much more prominent than that of the other eye, and it was apprehended that an abscess might be forming behind the organ; the cornea, which had lost much of its transparency, was nearly concealed by tumefied conjunctiva, of a crimson colour, which distended the palpebræ, and added materially to their projection. Leeches and belladonna had been applied, and mercury also administered, on account of inflammation of the iris and tunics generally. A few scarifications were made into the vascular conjunctiva, with the view of relieving the chemosis.

At this time the patient became weakened by several attacks of uterine hemorrhage which was arrested by the ergot of rye and cold lotions. The mercury, which had affected the gums, was consequently discontinued. Quinine was now liberally administered, with a sustaining diet.

On the 28th the vision was entirely gone; and, considering the eye to be irremediably lost, I advised the whole treatment to be directed to sustain the system, and repress the uterine hemorrhage, which had returned, and was producing great exhaustion. The quinine was therefore continued, with a larger quantity of sulphuric acid.

In the meantime, the right lower extremity became stiff and swollen; the calf of the leg became swollen and tense, and a large quantity of matter was evacuated by an incision. Abscesses about the knee-joint, and others in different parts of the limb, were opened immediately on being detected: their contents consisted generally of well-formed pus; the integuments were not materially discolored.

On the 12th of April, the right knee-joint had become the seat of painful swelling from effusion into its cavity; and its several structures suffered from the effects of the most destructive inflammation. In fact, it was evident that the whole articulation was extensively disorganized. A very large abscess subsequently made its appearance in the upper part of the thigh, and was opened near to Poupart's ligament.

From this time Mrs. M—— steadily improved in every respect. The knee yielded gradually to passive extension, and though nearly ankylosed at the date of the last report, the patient is able to support herself on the affected limb. The eye was reduced to a third of its normal size, and had receded to the back of the orbit; the tunics had not ulcerated.—*Lond. Med. Gaz.*, Jan. 1847.