IMPACTED RECTUM, CAUSED BY EATING STICK CINNAMON.

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C. G., a boy 10 years of age, ate, late in the afternoon of Saturday, April 11th, very freely of stick cinnamon. He was playing on the wharf, and easily obtained large quantities of it. He continued to eat it at intervals through the evening, and felt no inconvenience till he went to stool at noon on Sunday. He then found that he could pass nothing, but had considerable soreness about the anus, from which he drew several pieces of the cinnamon. He kept about during the day, though in considerable pain, and appeared on the stage at Sunday School that night.

On Monday, the pain was worse, but his appetite continued good and he went to school. At noon he began to have a thin, scanty, high-colored, offensive, involuntary discharge from the bowel. He told the family that he had a diarrhoea; his evident disinclination to move was ascribed to this cause, and he took some paregoric.

On Tuesday, the pain had increased so much that he could scarcely sit without crying. His appetite was diminished, but he was at school that day.

On Wednesday, he complained of the soreness of the rectum. An examination was made by Dr. John Ware, who was attending the family, and the lower part of the bowel was found to be completely filled with the sticks of cinnamon. An enema of sweet oil was ordered, which brought away a few pieces.

On Thursday, the patient being etherized, I passed the finger into the rectum and proceeded to break up and hook down the mass. After about twenty minutes, all had been brought down which could be reached by the finger. The cinnamon was in pieces varying from one-fifth to one-fourth of an inch in length (some of them were upward of half an inch); the quantity removed amounted to half a teacupful. At first there was but little action on the part of the intestine, but latterly there was much bearing down of the rectum, which helped to bring away the mass, and to force that above down within reach of the finger. He was ordered a dose of castor oil and an enema. The oil operated in about three hours; the dejection consisting of matter, such as had been brought away. After the enema he had a second discharge, the last half of which was faecal and with no sticks in it. The discharges after this were wholly faecal. He had no further trouble, except a slight soreness which lasted a few days. The cinnamon, washed clear of all extraneous matter, amounted to a moderate sized teacupful. The occurrence of the watery discharge is worthy of notice, since, without any examination of the rectum, it would have misled the physician as to the nature of the case.

About four years ago I saw a case of obstruction from the same cause, which also occurred in Dr. John Ware's practice. The boy

then went a week without any discharge, complaining at first only of costiveness, till the soreness about the anus led to an examination. Rather a longer attempt was made to remove the mass by cathartics and injections, but it was finally taken away with the finger. The quantity removed was larger than in the case above reported, amounting to nearly half a pound; a large quantity of fæces was passed afterwards, and the boy recovered without any bad symptoms.

I do not know if other cases of obstruction from this particular cause have been reported, but, considering how often cinnamon is eaten by children playing about the wharves, it is a little strange that they are not more frequent.

DR. SKINNER'S FRACTURE APPARATUS.

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THE mechanical contrivances for obtaining and maintaining proper position of fractured bones, have been so numerous, and in some instances of so complicated a character, that the general practitioner in the country, who has to give equal attention to all branches of the profession, often finds it difficult to decide upon the particular apparatus he shall use, and sometimes almost impossible to understand the practical application of the instrument in question.

It appears to me to be a very great desideratum for the practitioner to have an efficient yet uncomplicated and economical fracture apparatus, of easy and ready application, and at the same time efficient in fulfilling the various and multiform indications required. This matter, perhaps, assumes greater importance in this locality (near Dartmouth College, N. H., and Woodstock, Vt.), because of the frequent suits for mal-practice which have taken place of late years.

The desideratum mentioned, it seems to me, can be obtained by the use of Dr. S. A. Skinner's improved fracture apparatus, manufactured by G. A. Watkins & Co., Springfield, Vt. (the sole owners of the patent right), better than by any other contrivance I have examined. The apparatus for fracture of the lower extremities particularly, commends itself as a superior arrangement. The extension and counter extension can be maintained in a direct line with the fractured bone. The suffering from the confined and fixed position of the patient, and the constant pressure upon the same parts, which is unavoidable with most contrivances, is obviated. The position of the limb can be changed, either flexed or extended, without disarranging the apposition of the bones or any of the dressings. In cases of compound fracture the bandages may be removed for any examination or local treatment necessary, without disturbing the extension and counter extension of the