reason of the comparatively rapid evaporation of its ether, can be used more freely than an alcoholic tincture as an application to the skin. Furthermore, I think the solvent action of ether upon the sebaceous secretion of the skin makes ether a menstruum preferable to alcohol for drugs designed to affect the cutaneous surfaces, or to produce therapeutic effect through the skin. If a little ethereal tincture of capsicum be gently rubbed upon the back of a hand, it will produce a feeling of warmth, with some sensation of burning and pricking, in about a minute's time, together with an irregular and patchy hyperæmic redness, which may last some hours. If the tincture of capsicum be used as a rubefacient in the form of a liniment, an oily admixture gives frictionability, and an equal part of some bland fixed oil may be added. Solution of ammonia or oil of turpentine, or both of them, in such a liniment are good adjuvants if a sharply rubefacient effect be desired. An excellent and powerful rubefacient liniment may be made of equal parts of ethereal tincture of capsicum, liquor ammoniæ, oleum terebinthinæ, and oleum lini. The ethereal tincture may also be applied to the skin upon spongio-piline.

Birmingham.

A NEW METHOD OF TREATMENT IN INTRA-CAPSULAR FRACTURE OF THE HIP-JOINT.

BY HENRY W. FREEMAN, F.R.C.S.I.,
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DURING the International Medical Congress at Washington in 1887, a new method of treatment for intra-capsular fracture of the hip-joint was suggested to me by my friend, Dr. Nicholas Senn, of Chicago, and he supported his views by the experience of a considerable number of cases that had been treated by him recently in America. His suggestions were—that, in the place of the old-fashioned long Liston's splint with the long-constrained rest of the old treatment, no splint need necessarily be used, but that a couple of pairs of cotton drawers should be fitted upon the patient, cut off at the middle of the calves of the legs, and stiffened by having a solution of starch and gum well rubbed into the material, and then allowed to dry; that a window of about six inches in diameter should be made over the trochanter of the fractured hip, and that round the pelvis should be placed a stout jean belt, about eight inches in diameter, with straps and buckles, having inserted into it a concave piece of metal about eight inches by six, moulded to the trochanter, and then tightly buckled on round the pelvis, the tightening process being increased day by day, according to the condition of the soft parts and the immunity from suffering. The object of the treatment was very simple—namely, to convert an ordinary fracture of the hip-joint into an *impacted* one. I was determined on returning to England to try this treatment of Dr. Senn's, and the first case that presented itself was that of Susannah H—, a sturdy countrywoman of seventy-three years of age, who was admitted into the Royal United Hospital, Bath, on May 9th, 1888, having been thrown out of a cart on to her left hip. On examination of the joint there was found much swelling of the surrounding soft parts, shortening to the extent of from two inches to two inches and a half, with eversion, and with distinct crepitus on extension, and there was a good deal of shock and prostration. On the sixth day after admission she was so far recovered that Senn's method of treatment was adopted. The drawers were nicely adapted to the body, and the pelvic belt was carefully applied and graduated pressure made upon the trochanter of the injured side by tight buckling. At the end of the second week after admission she was placed in an armchair, and from time to time occasionally on to a couch. She progressed so satisfactorily that on June 19th (forty-one days after the injury) she stood and put some weight on her leg for the first time, and was able to get back to bed with but little help. On June 23rd she stated she wanted to go home, and said she could. She now could rest her weight freely on the injured leg. On July 9th she walked half-a-dozen yards without crutches, leaning on the shoulder of the ward nurse, and bearing weight upon both legs without pain. On July 18th she was able to walk round the ward, leaning on the furniture for support, and the shortening of the limb was now found to be about two inches. She was

fixed up with a boot with a two-inch cork-sole, and discharged on the same day. Six months afterwards she walked into the ward with a limp, using a short stick, but going freely and without help; and in February, 1890, she was shown to the members of the Bath and Bristol Branch of the Medical Association at one of their ordinary meetings, when she walked quite briskly with her boots off, with a shortening of about two inches, and stating that she was able to do most things as a housewife, and that she was in the enjoyment of good health. The pelvic band was worn round the pelvis for a period of seven weeks.

Bath.

CASE OF MOLLUSCUM FIBROSUM.

BY E. D. Y. PODE, B.A. OXON., M.R.C.S.

J. J—, aged fifty-six, was admitted into the Royal Albert Hospital on March 10th, 1890, under the care of Mr. Thom. He was a pale, emaciated man, with an anxious expression, complaining of a tumour which he described as a "wishing mark." On examination, he was found to be covered with an innumerable quantity of small tumours ranging in size from that of a small orange to a pin's head; from the thoracic wall over the lower true ribs of the right side was situated a large pendulous tumour, which hung down as far as the upper third of the thigh. He said that it had always hung down as far as this, but had lately become thicker, and two months ago the skin over the lower part of the tumour had become ulcerated. There was no history of any tumour in the family. On March 20th, the patient having been put under the influence of chloroform, Mr. Thom made an incision through the skin all round the pedicle, and then clamping with pressure forceps, and dividing successive portions with scissors, he removed the tumour. On removal of the forceps it was found that but few points required ligature. Catgut sutures and a drainage-tube were inserted, and the wound, which was six inches and a half long, was dressed with iodoform and sal alembroth wool. The tumour weighed $5\frac{1}{2}$ lb., and consisted of fibrous tissue, with large veins running in its substance. The patient was discharged from the hospital well on April 3rd, the wound having been dressed twice since the operation, and the temperature never having risen above 99.2° F.

Devonport.

AN UNUSUAL CAUSE OF PNEUMONIA.

BY H. HERBERT,
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I AM permitted by Surgeon Anderson, Civil Surgeon, to publish the following post-mortem report.

A young adult Arab died shortly after admission to hospital; no history of the patient could be obtained. The right side of the chest was normal, except for old pleuritic adhesions and frothy mucus in the bronchial tubes. The left pleura was lined with soft, yellowish lymph, and contained about half a pint of slightly turbid fluid. The whole of the lower lobe of the left lung, with a small adjoining strip of the upper lobe, was in a state of ordinary grey hepatisation, the only peculiarity being the uniformity with which the small bronchial tubes were occupied with strings of yellowish lymph. But in dividing