birth of her second child, after another hard and tedious labour, which greatly aggravated all her symptoms. A year and a half after, she positively states that she had complete retention for five days, which was at length relieved by medicine. No instrument was used. Her urine now caused her severe cutting pain, and was passed in a very fine stream, and she would sometimes go the whole day without passing it, rather than endure the pain. For the last ten months she has been under treatment by a medical man, who has made several attempts, but never succeeded in passing an instrument into the bladder.

On the 9th of October she was admitted into the hospital, but owing to the menstrual discharge being present no examination was made for a few days.

On the 13th she was examined, and found to have a very tight gristly stricture, about an inch from the external meatus. Mr. Curling succeeded, after a little difficulty, in passing first a No. 1, and afterwards a No. 2 male silver catheter. This was tied in until late at night, when it became so painful that it was withdrawn.

Oct. 14th.—The house-surgeon failed to get the catheter in.

16th.—Mr. Curling introduced No. 2 elastic catheter, and passed over it one of Wakley's elastic gum dilators cut short, in size about No. 4 or 5; tied in.

17th.—The small silver catheter belonging to Wakley's case was introduced, and No. 6 elastic gum dilator passed over it. This was repeated on the three following days, the catheter being tied in. On the 21st the house-surgeon failed to introduce it.

22nd.—No. 8 was introduced by Mr. Curling.

25th.—Patient complained of pain in the region of the bladder. Catheter taken out. To be introduced and kept in an hour every day.

27th.—She appeared to be ill; complained of pain in the left side, and a great deal of bearing down; urine a little cloudy from mucus. To have a warm bath, and twenty-five minims of tincture of opium. No instrument introduced to-day.

28th.—A little better. Bath repeated.

29th.—Seen by Mr. Curling. No instrument used. Urine contained a little mucus, but was acid. To have an effervescing ammoniacal mixture.

30th.—Mr. Curling introduced the catheter, and ordered it to be passed every day and kept in an hour.

Nov. 1st.—No. 11 passed: this was continued every day.

5th.—Has pains in her side and back. Spongio-piline ordered.

6th.—She is better.

13th.—Poorly. No instrument used.

16th.—Instrument passed every day; urine clear.

25th.—Had a slight attack of rheumatic fever. Ordered milk and beef-tea; and a bicarbonate of potash mixture.

26th.—Knees swollen; she is a little better.

28th.—Better.

30th.—Passed a small elastic catheter for herself, after a great deal of persuasion.

On Dec. 3rd she passed a No. 7 elastic catheter for herself, since which time the house-surgeon has not been able to induce her to pass it. She is exceedingly nervous, crying a great part of the day.

6th.—Her urine is now almost normal, but she still complains of a little pain and difficulty in passing it. There is no impediment to the passage of a large-sized catheter.

20th.—Discharged, cured, with instructions to have a No. 10 bougie passed occasionally.

GUY'S HOSPITAL.

STRANGULATED UMBILICAL HERNIA IN AN AGED FEMALE;
OPERATION AND REDUCTION WITHOUT OPENING
THE SAC; RECOVERY.

(Under the care of Mr. THOMAS BRYANT.)

THE interest of the following case consists principally in its successful termination. The age of the patient, the period of strangulation, the nature and large size of the hernia, are points which militated much against the success of the operation, especially when it is remembered that operations on umbilical hernia are, as a rule, most fatal. Mr. Bryant attributes the favourable result to the fact that the sac was not opened sufficiently to expose any portion of the intestine, nor to allow the surface of strangulated bowel to be manipulated. This

point is of great importance, and is one which should be remembered and acted on in future cases.

In former "Mirrors" we have recorded several successful cases of strangulated umbilical hernia. One, under the care of Mr. Lawson at the Western General Dispensary, was a woman, in whom the intestine was so adherent to the sac that it could not be returned (THE LANCET, vol. i., 1858, p. 190); another, under Mr. Stanley at St. Bartholomew's Hospital, also a female, in whom it was necessary to remove a protruded omentum (ibid., vol. ii., 1858, p. 575); a third case, under Mr. Heath at St. George's Dispensary, in which the sac and adherent omentum were removed with success (ibid., vol. i., 1859, p. 341); and a fourth case, under Mr. Prescott Hewett at St. George's Hospital (ibid., vol. ii., 1859, p. 338).

The notes of the following case were taken by Mr. Pembroke R. J. B. Minns, clinical clerk:—

Jane W—, aged seventy-four, married, was admitted into Dorcas ward on the 5th of December, 1860, with a strangulated umbilical hernia. She states that she has had the hernia for the last four years, but was always able easily to reduce it whenever it came down, although the mere fact of its descent would cause attacks of vomiting. She was in the habit of wearing a truss, which she took off before going to bed at night, and replaced in the morning, but on the 1st of December she found that she was unable as usual to return the hernia, which soon became painful. Hot fomentations were applied, but found to be of no avail. On the 2nd of December she began to vomit, and the tumour was somewhat enlarged. She allowed the hernia to remain in this state until the 4th, when she sent for her medical man, who ordered her an injection of gruel, which operated slightly, but gave no relief. He then applied the taxis for fifteen minutes, but finding that of no avail, advised her to go to the hospital. When admitted the vomiting was stercoraceous, and the tumour about the size of a man's fist, painful and tender to the touch. An attempt to reduce it failed. She was ordered to have ice applied to the hernia, and two grains of opium immediately. At half-past two A.M. she was placed under the influence of chloroform, and the taxis again applied; but proving of no use, she was immediately operated upon, and the bowel returned without opening the sac except at its neck, where the stricture was divided. The wound having been closed in the usual manner, she was ordered one grain of opium every three hours, and ice to be taken internally to alleviate sickness. The diet consisted of arrowroot and milk.

On the 7th, the pills were ordered to be taken three times a day; but at ten P.M., the abdomen being tender, she was ordered to take them every four hours.

On the 8th, her bowels were opened for the first time. She was ordered four ounces of brandy, and the pill every six hours.

On the 19th, she was looking as well as could be expected, although she complained of cough. Ordered six ounces of wine.

On the 20th, her cough still troubling her, she was ordered compound conium mixture three times a day, and a flannel bandage to be placed around her abdomen.

Jan. 12th, 1861.—The wound was very nearly healed, but her cough continuing, she was ordered ipecacuan wine in compound infusion of cascarrilla thrice a day.

On the 15th, a truss having been applied, she was discharged well.

GREAT NORTHERN HOSPITAL.

EXTENSIVE INJURIES FROM THE EXPLOSION OF A
LOCOMOTIVE ENGINE.

(Under the care of Mr. LAWSON.)

THE following case is an illustration of what an amount of injury a man may sustain without life being destroyed. The points of interest are—first, the peculiar mental condition of the patient for some time after the accident; and, secondly, the effect which this condition appears to have exerted over the reparative process. Brought into the hospital in a state of coma, in about twelve hours he somewhat rallied, and passed into that of traumatic delirium. Slowly, under the influence of opium, brandy, and a good diet, he gradually became tranquil; but his memory was for a time lost, nor did he recover it until after he had been five weeks in the hospital. Up to this date no reparative process had taken place between the broken extremities of the bones; but with the return of the mental faculties there was increased action in the site of the fractures, and a firm union was speedily effected between