the double compress well, he has been supplied with two instruments, with which pressure is made in the groin and in the middle of the thigh alternately. Appetite good; bowels costive; pulse natural.

18th.—Impatient and irritable; functions disturbed; looks pale and anxious; numbness in leg and foot; pulsations in the tumour weaker, and deposit going on.

26th.—Although the deposit seems to have become pretty thick and firm on the depending portion of the tumour, yet, on removing the tourniquet, the impetus of the current of blood is felt very strongly, especially laterally, where the walls are thin and bulging. There appears to be a little effusion into the knee-joint, and the œdematous condition of the limb is increased. The patient is very irritable and impatient, and it is pretty evident that, for the last few days at least, he has been in the habit of loosening the tourniquet almost directly after it has been applied; taking these facts into consideration, it was agreed, at a consultation to-day, that ligature of the artery under the circumstances was advisable.

27th.—Quarter to two P.M.: The patient being placed under the influence of chloroform, Mr. Ure proceeded to tie the artery in the usual manner. With a small scalpel he made a linear incision of about three inches and a half in length, commencing about two inches and a half below the middle of Poupart's ligament, cutting in the axis of the limb, and keeping to the inner side of the sartorius muscle. Having made the incision through the skin and superficial fascia, he then divided the fascia lata on a director to nearly the same extent, exposing the femoral sheath; a portion of this was taken up with a pair of forceps and divided for about three-eighths of an inch so as to admit the aneurism needle, which was then carried round the artery from the inner to the outer side, and the vessel firmly secured. The edges of the wound were now brought together with strips of plaster, the whole limb enveloped in a flannel roller, and the patient put to bed.—Five P.M.: Is very comfortable; has very little pain down the leg; pulse 100, full.

28th.—Eleven A.M.: Has had a pretty good night, and complains only of an occasional jumping pain in the thigh; there is a little oozing from the wound; no perceptible difference in the temperature of the two limbs.

Dec. 1st.—Wound has healed by first intention; there is a slight exudation of healthy-looking pus from the point where the ligature emerges; no pain.

10th.—The tumour is smaller and softer, and quite free from pain; there is still a little discharge from the neighbourhood of the ligature, which appears firm.

13th (seventeenth day).—Ligature came away this morning.

19th.—No sensation in the toes; faint but distinct on the dorsum of the foot. Limb to be encased in cotton-wool.

Jan. 7th.—He gets about very well with the aid of crutches, and is able to put his foot to the ground. The sensation in the toes is gradually increasing.

22nd.—Left the hospital cured. The tumour in the ham is quite firm and hard, and the collateral circulation fully established. His health is first-rate.

It may be remarked that the numbness of the leg, which was somewhat troublesome during his recovery, was attributed by Mr. Ure to the pressure of the over-distended neurilemmal vessels of the sciatic nerve, which were necessarily increased in size during the establishment of the collateral circulation.

LONDON HOSPITAL.

ANEURISM OF THE POPLITEAL ARTERY IN AN OLD MAN WITH AN ARCUS SENILIS; TREATMENT BY COMPRESSION; CURE.

(Under the care of Mr. ADAMS.)

THE notes of the following case were taken by Mr. D. H. Dyte:—

Wm. G—, aged sixty-seven, by occupation a storekeeper, was admitted on December 21st, 1860. This patient, a tall and thin man, of florid complexion, in whom the "arcus senilis" was well marked, stated that he had always enjoyed good health; but that ten days previous to admission, whilst walking, he suddenly felt a severe pain in his left ham, which was followed by numbness, extending down the leg of the same side. Thinking he had sprained his knee, he applied warm fomentations, soap liniment, &c.; but at the end of three days, not finding any relief from this treatment, and noticing a swell-

ing at the seat of pain, which began to increase in size, he consulted his medical attendant, who informed him of the serious nature of his disease, and recommended his immediate removal to the hospital.

Dec. 21st.—On admission, the symptoms above described were complained of, and there was found upon examination a violently pulsating tumour, of the size of a small orange, occupying the lower part of the popliteal space. This tumour could be rendered empty and flaccid by pressure upon the femoral artery, and upon removal of the pressure it would rapidly re-fill, and pulsate as before. The patient was closely questioned, but he emphatically stated that he had never received any injury at the part, and that he had not felt any pain nor inconvenience, nor had he observed any swelling, before ten days prior to admission. He was placed on full diet, and ordered to remain perfectly at rest.

28th.—The tumour had not increased; the pain and numbness continued as before. A bladder containing snow, which was afterwards exchanged for ice, was applied to the tumour, and an attempt was made to effect pressure upon the femoral artery against the pubis by means of a weight. This was found to be ineffectual on account of the man's restlessness, and was consequently abandoned.

Jan 1st, 1861.—The patient still complains of numbness in the leg; but the pain is not so great as hitherto. After some considerable trouble, a Signoroni's tourniquet was applied to the artery, about an inch below Poupart's ligament, and perfect control over the aneurism was thus obtained. The instrument could not be applied at any other part of the thigh, as the man would not bear the pain caused by it. The application of the ice was now discontinued.

8th.—The pain and numbness not so much to-day. The tumour has very slightly decreased in size.

15th.—The tumour has become somewhat harder and firmer, is rather smaller than hitherto, and pulsates less violently. The artery above the point of pressure is a little enlarged, and has assumed the appearance and character of a small fusiform aneurism.

22nd.—About this time the patient suffered from a severe attack of catarrh and bronchitis, for which suitable remedies were administered, and the application of the tourniquet was ordered to be discontinued.

31st.—On the re-application of the tourniquet, the aneurism was found to have attained its original size. In the course of a few days, however, it had again diminished.

Feb. 11th.—The tumour is gradually becoming smaller and harder, the pulsation less distinct, and on some days could not be felt at all. The patient feels quite well, and does not complain of any pain.

26th.—The tumour is now the size of a large walnut, is hard and firm, and scarcely any pulsation can be felt in it. There is a small artery (sural?) running across it, which pulsates distinctly.

March 26th.—The aneurism has not diminished in size; but is much harder and firmer than hitherto. Not the slightest pulsation has been felt in it for the last fortnight. The patient, however, has complained of great pain and numbness in the ham, and down the leg, the superficial veins of which are much distended. Strapping and bandaging was ordered; but this, having irritated the skin, was discontinued, and an elastic cotton bandage was applied instead. He experienced great relief from it; and is able to sit up, and walk about the ward with the aid of a stick.

April 12th.—The patient does not complain of any pain or numbness, and walks about without inconvenience. The tumour continues to diminish in size, and is very hard and firm.

19th.—He is now quite convalescent, the tumour being about as large as a walnut and not causing any inconvenience. There being no reason for the patient remaining in the hospital, he was discharged, cured.

The man's heart had been examined, but no sign of disease could be detected.

ST. THOMAS'S HOSPITAL.

ANEURISM OF THE FEMORAL ARTERY; COMPRESSION; LIGATURE OF THE VESSEL; SECONDARY HÆMORRHAGE; LIGATURE OF THE EXTERNAL ILIAC ARTERY; FATAL RESULT.

(Under the care of Mr. SOLLY and Mr. SYDNEY JONES.)

E. C—, a groom, aged thirty-three, was admitted into Abraham ward, under the care of Mr. Solly, Nov. 14th, 1860. He was a very robust, healthy-looking man, and said he was

of temperate habits. About nine months before admission, when getting quickly out of bed one morning, he felt a sudden cramp in his thigh; and very soon after this he found a small tumour, about the size of a hazel-nut, on the left thigh, midway between the knee and the hip. In his own mind he associated the "lump" and the cramp he had experienced. The tumour continued to enlarge, at first without pain, but latterly it had become tender to the touch.

On admission, it was found that he had an aneurism of the femoral artery in the middle of the thigh, measuring five inches in vertical diameter and three inches in the transverse. Pulsation and loud bruit existed. The sac could not be entirely emptied, and pressure upon the femoral above the tumour controlled the circulation through it for a time; but after a few minutes it began to fill and pulsate again. In some parts there was considerable tenderness to touch, but no redness of the integument.

Nov. 16th.—Pressure by horse-shoe tourniquet was applied, and one drachm of tincture of digitalis was given three times a day and an opiate at bedtime. He became very irritable under the pressure, which he said caused him much pain, so that on the 20th the pressure was remitted. The tumour was then harder and smaller, and he was persuaded to try the pressure for a little longer. On the 21st it was recommenced, and he took twenty minims of tincture of sesquichloride of iron three times in the day. He still suffered greatly from the pressure, although every endeavour was made to mitigate his suffering by changing the position of the tourniquet, and on the 27th it was finally given up, the tumour being still harder and smaller.

On the 28th, chloroform was given, and the femoral artery, above the origin of the profunda, was ligatured by Mr. Jones.

29th.—He was not sick from the chloroform, and had a fair night after an opiate. The tumour is now hard, and there is no pulsation; the leg is warm; the wound looks well. His countenance is cheerful; pulse quiet; skin cool.

30th.—Going on well. No pulsation in the aneurism; no constitutional disturbance; the wound looks healthy.

On Dec. 2nd, there was a slight return of pulsation in the aneurism, which was hard and small. He continued going on satisfactorily till the 9th, when the ligature came away spontaneously, and at nine P.M. there was slight hæmorrhage (about a teaspoonful); it recurred also at three o'clock the following morning; and there could be no doubt that, although so small in quantity, it was arterial.

On the 11th, the hæmorrhage recurred several times in large quantities, and the external iliac artery was ligatured by Mr. Jones, by which the bleeding was arrested. He was very much weakened by the loss of blood, and had a troublesome cough, for which the conium and ipecacuanha pills were ordered. He took a liberal diet, and four ounces of wine daily.

On the 17th the bleeding again commenced from the old wound; it was repeated several times in small quantities. Suppuration also occurred in the sac of the aneurism, and poultices were applied. His general health kept remarkably good, and he slept and took his food fairly.

24th.—Ordered half a drachm of the tincture of sesquichloride of iron three times a day.

26th.—The sac of the aneurism was laid open and pus let out. He was now much emaciated, and generally worse.

On December 30th and two following days hæmorrhage took place several times from the old wound; it was arrested by pressure and ice. There was free discharge from the aneurismal sac; his cough was troublesome, and his condition hopeless.

Jan. 2nd, 1861.—There was hæmorrhage from the wound (made in ligaturing the femoral), and it was then laid open, a clot turned out, the course of the femoral laid bare as high as Poupart's ligament, and all bleeding points tied. The operation was attended with the loss of a considerable quantity of blood, and the patient was very collapsed afterwards.

4th.—Slightly rallied; no return of bleeding. He takes ten ounces of wine and liberal diet.

On the 5th the hæmorrhage again came on, and it continued more or less until he died from exhaustion on the 14th of the month. No post-mortem examination was permitted.

CHARING-CROSS HOSPITAL.

ANEURISM OF THE FEMORAL ARTERY; LIGATURE OF THE TRUNK ABOVE IT; FATAL RESULT.

(Under the care of Mr. CANTON.)

FOR the notes of the following case we are indebted to Mr. Travers, house-surgeon to the hospital.

John S—, aged twenty-nine, carpenter, residing in London, of pale, strumous aspect; has always enjoyed good health; for the past two years his employment has compelled him to be constantly on his feet, with a great deal of quick walking; habits invariably temperate. About a month since he first noticed a swelling on his thigh, and although it did not cause him any inconvenience beyond some slight pain, he applied for relief at this hospital a fortnight ago. An aneurism of the femoral artery was diagnosed, and he was admitted. The tumour was found to be about three inches and a half in length, and two inches in breadth, situated at the lower and inner part of the thigh, and extending beneath the tendon of the adductor magnus muscle into the popliteal region. It pulsated synchronously with the pulse. The pulsation was stopped on pressure being made on the artery above, and increased when the pressure was applied to the vessel below the tumour. A distinct bruit was heard on applying the stethoscope over its site at each pulsation. The patient, since confined to his bed, has not complained of pain or annoyance from its presence. He cannot in any way account for its origin, and says it has not increased in size since he first perceived it. The thigh of the affected side, above the swelling, is considerably less in circumference than its fellow. An examination of the heart and large arteries having been made, without anything abnormal being detected, on the 3rd of November Mr. Canton tied the femoral artery at the inferior part of Scarpa's space. The pulsation in the tumour immediately ceased. The patient was placed in bed, and the leg enveloped in cotton wool. When visited in the evening, he expressed himself free from pain. The temperature of the affected limb was lower than that of the other.

Nov. 4th.—Has passed a good night, and appears quite comfortable; temperature much higher than last evening, though not yet normal.

5th (morning).—Temperature much increased, considerably higher than in the opposite limb.

6th.—Temperature lower than yesterday, but little more than natural; very comfortable; no annoyance.

7th.—He was seen early this morning. He had passed a rather restless night; had an attack of vomiting; looked pale and anxious; pulse quick and thready; bowels costive. Mr. Travers, the house-surgeon, removed the stitches and piece of sponge. Ordered two calomel and colocynth pills at once, a magnesia draught four hours after, and bark and ammonia three times in the day. This treatment appeared to relieve the patient much, and in the evening he was better.

8th.—Still improving; bowels moved once; wound looks much better; temperature normal.

9th.—Not so well this morning; there has been some slight hæmorrhage during the night. An extra pad was put over the wound, and the bandage tightened. As the tongue looked brown and the patient appeared to have some slight pyrexia, a saline mixture with small doses of antimony were ordered. In the evening he was much better; no fresh hæmorrhage had occurred.

10th.—The patient has passed a very comfortable night, and seems better this morning. Towards the after part of the day he became worse, appearing altogether exhausted, and the pulse becoming weak. Brandy and egg was afterwards given, and also ammonia and sulphuric ether.

11th.—Has slept pretty well; pulse much fuller; altogether not so low; heat of skin somewhat intense; bowels rather costive; no fresh hæmorrhage. Ordered the stimulants and nourishment to be carefully continued.

12th.—Early this morning there was some more venous oozing. He had slept pretty well, but complained of pain in the left leg, which is œdematous, together with the ankle. Linseed poultices were ordered to be applied to the leg, and the stimulants and nourishment to be continued. To increase the patient's comfort, the leg was flexed, the knee being raised by means of pillows.

13th.—Appears better this morning; has passed a comfortable night and taken the nourishment; leg still swollen and painful, though less so than yesterday.

14th.—Much the same this morning; pain in the leg rather less, but complains now of great pain and tenderness in the right elbow and shoulder; these parts are somewhat swollen. Ordered to increase the stimulants and continue the medicine and nourishment. In the evening he was much worse, being low and exhausted, with a small and quick pulse, and a dry and brown tongue. Opiates were given.

15th.—Tongue not so dry; pulse better; has passed a very restless night, with frequent delirium. In the evening he was worse again, having had another attack of vomiting, and re-