New Inventions.

NEW STRICTURE DILATOR.

MESSERS. ARNOLD AND SONS (of West Smithfield, London) have constructed for me an instrument which I hope will be appreciated by the profession. The troublesome and painful system of passing catheters and bougies for strictures ought certainly to be superseded by some procedure less irritating to the patient and more convenient to the practitioner.

The instrument illustrated here consists of a director, a propeller, and twelve beads. The director is a flexible metal stem terminating in a bulb, the stem being marked at every half inch. The propeller, which is used to push the beads along the director, has a terminal bulb (perforated), a handle, and a metal ring with hole to receive director and screw to clamp it. The beads are made of metal and represent the different catheter gauges. The director is passed first, then one or more beads are threaded on it and pushed home. The instrument may then be fixed and withdrawn. Possibly in resilient and other strictures the act of drawing the instrument back and forwards would have a good effect. The exact position of the stricture can be ascertained by passing a bead as far as the stricture and then clamping the ring at the orifice of the urethra.

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AUTOMATIC WOUND RETRACTORS.

THE accompanying illustration represents a pair of wound retractors threaded on a rubber cord, and designed to obtain traction on the edges of a wound in operations on the neck, limbs, &c. Each retractor consists of a flat piece of steel, one end of which is fashioned into a pair of hooks, blunt or sharp. The other end is bent upwards, is perforated at the angle by a hole through which the rubber cord passes, and the latter is then clipped into a vertical slot after the manner of fixing the ends of a field tourniquet. The instrument may be held or altered in position by grasping the grooved side of the "handle" portion. To use the retractors (say, for excision of a varicose vein of the leg) thread one on each end of a

FULL SIZE

long length of rubber cord or thick tubing and lay its centre beneath the limb; after the skin incision hook a retractor into the wound edges on either side, making the tension sufficient by drawing the cord through the base of either hook and fastening off. Equal or unequal gaping of the wound

may be secured by altering the tension on both sides or on one only. The retractors are made of varying sizes and lengths, and with blunt or sharp hooks as desired, but for retracting the abdominal parietes the proximal end is fashioned like a flat pothook but without prongs. For tracheotomy and operations on the middle line of the neck, operations on blood-vessels of the limbs, abdominal sections, and in any situation where bilateral traction can be employed, these retractors will be found useful, especially where one is short-handed as regards assistants.

Some of the advantages possessed by these hooks are:—Less handling of the wound is required; more room is obtained in which to work, and less assistance is necessary; it is, therefore, more easy to maintain asepsis. I am indebted to Professor Jordan Lloyd, of Birmingham, for permission to modify his well-known retractors, and to Messrs. Down Bros., of St. Thomas's-street, London, S.E., for the care and patience they have displayed in carrying out my wishes.

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NEW ANÆSTHETIC MASK.

THE annexed illustrations represent a chloroform or A.C.E. mask devised by me and made by Messrs. Mayer and Meltzer, of Great Portland-street. The mask consists of a metal frame,

with upper and lower rims, the latter being channelled so as to prevent condensation-moisture or anæsthetic fluid reaching the patient's face. A and B (Fig. 1) represent the open position of two rings which, when closed as in the illustration, keep in place two pieces of flannel. At C there is an airway the lumen of which is quite double that of the adult trachea. At D (Fig. 2) there is an opening for the tube of a Junker which can be attached to a vulcanite plug filling the opening. This tube is supplied with the mask. Also, to the flannel at E a sponge can be affixed if it be desired to give ether, in which case a single piece of flannel large enough to cover the mask from E to F should be used. The advantages of the mask are:—1. It allows a free intake of air at all times during anæsthetisation, so that with ordinary care coughing and swallowing, struggling, asphyxia, &c., are noticeably absent. 2. The position and dimension of the airway, which, while permitting absolutely unimpeded respiration, is so placed that with each inspiration the vapour is inhaled in amounts varying with the quantities of anæsthetic used. 3. The ease with which the anæsthetic can be dropped on the mask without risk of touching the patient's face. 4. Its cleanliness. The covers for the upper