labour pains set in. I immediately dilated the os and applied a small pair of forceps and delivered to prevent the patient using any undue force. From this time on there was a rapid recovery, the abdominal wound healing by first intention, the patient being allowed to leave her bed on the tenth day after the operation. The temperature never rose above 100° F.

The only feature in the case which I think may be interesting to readers of THE LANCET is the intense pain complained of. Whence did this pain originate? The tumour was an extra-uterine fibroid connected with the fundus uteri, but not, in my opinion, pressing on any nervous centre likely to cause so much pain as the patient evidently experienced.

Ilford.

ARSENIC AS AN EXTERNAL IRRITANT.

BY A. MILSON ROBERTS, M.R.C.P. IREL., &C.

ON May 18th a man, a gardener, called upon me with an erythematous redness and considerable puffiness of both legs and feet nearly as high as the knee. He also complained of sickness and diarrhoea and his tongue was covered with a slimy yellow fur. Under simple treatment he rapidly recovered. The skin of the legs and feet desquamated. Just a month later he came to me again in rather a worse condition. There was a greater amount of erythema and the stomach and bowels were in a most irritable condition. Having in mind the violet powder poisoning cases with which I was connected in 1878,¹ and being unable to account for the recurrence of the symptoms, except on the assumption of irritant poisoning, I elicited after some cross-examination that he had been using a weed-killer and for two or three days on each occasion before the symptoms arose his boots and trousers had been thoroughly saturated with it. A rough analysis showed this weed-killer to contain a large quantity of arsenic.

Little Hadham.

A CASE OF RETENTION OF URINE CAUSED BY RETAINED MENSTRUAL FLUID.

BY OLIVER SMITHSON, M.R.C.S. ENG., L.R.C.P. LOND.

SOME weeks ago I was called to see a girl, aged 16 years, who could not pass urine and who was in great pain. On examining the patient I found the abdomen greatly swollen and could feel the bladder almost as high as the umbilicus. A draught of tincture of hyoscyamus and bicarbonate of potassium was administered and the girl put into a hot bath. This proving ineffectual, I passed a catheter and drew off a large quantity of urine, the pain being at once relieved. Whilst passing the catheter I felt a tense, fluctuating swelling projecting between the labia. The symptoms returned shortly afterwards and necessitated the use of the catheter at regular intervals. Finding no cause for the retention I made another and more careful examination and then found that the swelling to which I have referred was an imperforate hymen bulging forward between the labia. With strict antiseptic precautions I incised the hymen, which was very thick and leathery, and let out a quantity of menstrual fluid of very dark colour and extremely viscid in character. After this there was no further trouble, and the patient is now in excellent health. The retention was evidently caused by the great pressure of the menstrual fluid. The patient has several sisters older than herself who all started menstruating when about 13 years old, so that in all probability the menstrual fluid had been collecting for some considerable time.

Grays.

¹ THE LANCET, Sept. 21st, 1878, p. 420.

SANITARY MATTERS AT TRURO.—At the meeting of the Truro City Council held on August 21st several of the members drew attention to the disregard of sanitation in the city, especially in the lower parts of it. It was stated that crude sewage was discharged into the river, and the town clerk mentioned that he had received complaints as to the stench from the river. A member said that in a short time steps would be taken to compel the corporation to remedy the present state of affairs.

A Mirror

OF

HOSPITAL PRACTICE, BRITISH AND FOREIGN.

Nulla autem est alia pro certo noscendi via, nisi quamplurimas et morborum et dissectionum historias, tum aliorum tum proprias collectas habere, et inter se comparare.—MORGAGNI *De Sed. et Caus. Morb.*, lib. iv. Proecmium.

WESTERN OPHTHALMIC HOSPITAL.

A CASE OF EPITHELIOMA OF THE CONJUNCTIVA;
ENUCLEATION.

(Under the care of Mr. ARTHUR W. WHEATLY.)

THE comparative rarity of seen and reported cases of malignant new growths affecting primarily the visible front of the eyeball appears to fully justify the narration of the following case. It is somewhat strange that after a duration of more than three years no involvement of the lymphatic glands in front of the ear should have been present; but the malignancy of epithelioma of the conjunctiva varies greatly in different cases.

A hale old man, about 70 years of age, was admitted into the Western Ophthalmic Hospital under the care of Mr. A. W. Wheatly on May 26th, 1899, for the treatment of a bleeding tumour of the left eye. According to the patient's statement it must have been three years previously that it was first noticed that there was "something wrong with the eye," but he took little notice of it and only latterly had it proved a source of trouble to him. The main complaint on admission was that the growth was evidently increasing somewhat rapidly in size, that it was sometimes the seat of pain, and that occasionally it bled, but the pain had always been bearable and the hæmorrhage had never been large.

On admission a warty growth was seen invading the outer fourth of the corneo-sclerotic region of the left eye. It was somewhat triangular in shape, the base being limited behind by the insertion of the left external rectus, above by the lower tendinous fibres of the superior rectus, and below by the external fibres of the inferior rectus, whilst the apex extended partly over the cornea and the pupil, and (in consequence of internal deviation of the eye) occluded the latter for practical purposes of vision. The growth was in all parts firmly adherent, its surface was papillomatous and friable, and it bled easily. It was densest in the region of the sclerotic adjacent to the cornea, measuring one-sixth of an inch in thickness in this situation. From here on June 2nd Mr. Wheatly removed a portion of the growth for microscopical examination, and having submitted it to a well-known authority received in due course the report which confirmed his worst suspicions as to its malignancy. It proved to be a squamous-celled epithelioma.

The case was watched for a time, but notwithstanding the fact that no glandular infiltration could be detected the growth was manifestly increasing and delay seemed to be dangerous. Enucleation was therefore advised and the patient's consent having been obtained Mr. Wheatly performed the operation on June 16th, removing also such tissue as appeared to be in dangerous proximity.

Remarks by Mr. WHEATLY.—I am much indebted to Mr. C. Devereux Marshall (pathologist to the Royal London Ophthalmic Hospital, Moorfields) who saw the patient prior to enucleation and who has since made a careful macroscopic and microscopic examination. He confirms the prior report and states that the growth is "a squamous-celled epithelioma which starts in the epithelium at the corneo-scleral junction and can be traced and shown to be continuous with that covering the cornea. The growth is much infiltrated with small round cells and this is a secondary inflammatory change."

ROYAL INFIRMARY, LIVERPOOL.

A CASE OF PUERPERAL SEPTICEMIA IN WHICH ANTI-STREPTOCOCCIC SERUM WAS USED WITH SUCCESS.

(Under the care of Dr. T. B. GRIMSDALE.)

UP to the present time a large number of cases have been published in which anti-streptococcic serum has been