Wound of thigh.—A shoemaker, aged thirty-seven, had contrived to run his knife into the outside of the thigh, inflicting a severe wound, which bled profusely till pressure was applied. Six days afterwards it burst out again, and ten days subsequently fresh hæmorrhage took place, and he was admitted into the hospital. Mr. Callender opened up the wound, but failed to find any vessel requiring ligature. However, there has been no bleeding since, so it is probable that a partly divided artery got completely cut through during the operation, and has therefore ceased to bleed. The wound is now healing under a carbolic acid dressing.

Syphilitic phagedæna.—In a woman aged thirty-three, with extensive phagedænic ulceration over the patella (syphilitic history), Mr. Callender is applying resinous ointment, and using no specific treatment. The object is tentative, but the patient so far could not be doing better.

LONDON HOSPITAL.

Fracture of both patellæ.—A ship steward, under Mr. Curling's care, has both patellæ transversely fractured by muscular violence. There was at first considerable effusion into the joints. The inclined plane was adopted for a few days, and ice applied to the knees. Broad back-splints were then adapted to the extremities by strapping and bandages. The position of the fragments is highly satisfactory.

Skin disease.—Under the same surgeon's care is a man, aged sixty-four, with extensive disease of the skin of the right half of the head and face. Its nature is difficult to describe; and it is not easy to give a name to the affection, which suggests to different observers the idea of lupus, eczema, or serpiginous syphilis. It began, the man says, about twelve years ago by a speck, about the size of his nail, in his whisker, and gradually spread. The skin is deeply ulcerated, and the cartilage of the upper part of the ear is exposed. Since his admission he has had several attacks of erysipelas.

Wound of brachial artery, and division of median nerve.—A man, aged forty-nine, cut his right brachial, or perhaps rather its bifurcation, with broken glass. Mr. Ruttledge, the house-surgeon, tied three bleeding vessels. The median nerve was divided. Sensation is lost on the palmar aspect of the thumb and the two next fingers, and is dulled on the outside of the ring finger, but is good elsewhere.

UNIVERSITY COLLEGE HOSPITAL.

Carcinoma of omentum and lung.—Under Sir Wm. Jenner's care is a single woman, aged twenty-eight, who presents the following symptoms:—The belly is much enlarged, and through its walls are to be felt a large number of very hard nodules, easily movable. There is enlargement of the superficial veins on the trunk and extremities. There is dulness, bronchial breathing, and bronchophony in the right side of the chest. The arms are very œdematous, the swelling being limited rather abruptly about the insertion of the deltoids. The face also is œdematous, and the lips are purple. There has been apparently phlebitis in the arms. It would seem that there is carcinoma of the omentum, with secondary deposit in at least one lung.

KING'S COLLEGE HOSPITAL.

Syphilitic laryngitis; tracheotomy.—A man, aged twenty-seven, was admitted, under Dr. Duffin's care, on the 24th of March, with suffocative symptoms following a pustular eruption and scars on the forehead. On admission, inhalations of steam were employed; under which he improved at first, but at the end of four days his suffocative symptoms returned, and tracheotomy was performed. Breathing was immediately improved, and has since continued good. A convenient arrangement is being employed for supplying warm and moist air for respiration. Over the throat is placed a wooden box, at the bottom of which are introduced flannels wrung out of boiling water.

Rheumatic arthritis.—Under the same physician's care is a woman, aged forty-four, who came in on the 9th of February with rheumatic arthritis. The knees and ankles were chiefly affected on admission; but they have somewhat improved. There is now great enlargement of the wrists, elbows, and shoulders, which are very painful. There is none of the grating to be noted which is so often observed in the joints in such cases. The affection has existed for fourteen months, in attacks which have lasted

from six to ten weeks, with intervals of comparative exemption for two or three months. Her temperature has varied from 99.2° to 100.2°, and her pulse has always been high. Whilst taking iodide of potash there were considerable variations of temperature. No crystals of uric acid have been found in her blood. A sister died of cardiac disease following acute rheumatism. She has taken sulphate of iron in five-grain doses, guaiacum, iodide of potash in ten-grain doses, cod-liver oil, quinine, and has used stimulating embrocations; but without appreciable relief. Hot-air baths made her worse. No remedy has apparently been of use to her.

Provincial Hospital Reports.

SOUTH DEVON HOSPITAL, PLYMOUTH.

OVARIAN DROPSY OF TWO YEARS' DURATION; OVARICTOMY; RECOVERY.

(Under the care of Mr. WHIPPLE.)

THE house-surgeon, Mr. Francis Lovell, has obliged us with the following notes:—

Mrs. R—, aged twenty-nine, the mother of four healthy children, the youngest two years old. Her confinements have all been natural, and she has always been a healthy woman. The catamenia have been very irregular during the last year. Two years ago, after her last confinement, she first noticed an enlargement of her abdomen, on the right side. This gradually but steadily increased for the next eighteen months, until it became so large as to greatly hinder her getting about her house. She was then tapped, and eleven pints of dark-coloured fluid were evacuated. During the next two months she does not think her abdomen increased at all; but at the end of this time it began to swell again, and in six weeks became as large as it had been previous to the tapping. She was then, on January 2nd, admitted into the hospital, and was put upon a course of steel, and a generous diet. The catamenia, which had been absent for four months, reappeared a week after her admission. She measured thirty-seven inches round her abdomen, and suffered frequently from sickness, constipation, and pains in the lower extremities, &c. During this month her abdomen increased about four inches in circumference, and her distress accordingly.

Feb. 4th.—To-day she was put under the influence of chloroform, and ovariectomy was performed. Nearly the entire cyst was found firmly adherent to the adjacent parts, particularly to the omentum. These connexions were divided with the hot iron, and the operation was necessarily a very severe and long one. Three of these connecting bands had to be ligatured, as the cautery failed to arrest the hæmorrhage. The pedicle was about three inches long, or perhaps hardly so much. This was divided with the cautery and returned. She vomited several times during the operation, and the intestines were necessarily handled a good deal. The operation lasted an hour and twenty minutes, including the time for the chloroform. The wound was closed with silver-wire sutures, and a many-tailed bandage was applied round the abdomen. The cyst contained ten pints of dark-brown fluid, and, after the contents were all evacuated, weighed twenty-four ounces; its walls were very thick and hardened.—3 p.m.: She is very sick. Pulse 90. No pain in abdomen. To suck ice continually.—6 p.m.: Sickness continues. Pulse 96; very feeble. Skin warm and moist. She had two ounces of beef-tea, with five grains of quinine, thrown into the rectum just now, and this is to be continued every four hours.—11 p.m.: Still sick. Pulse 108; feeble. Half a pint of clear urine was drawn off at 7 p.m.

5th.—Passed a good night. No pain; skin clear and moist. Pulse 114; soft. Sickness is better.

6th.—Sickness continues. She has no pain, and looks calm and quiet; has passed her urine freely.

7th.—Still sick, and has had a free use of the bowels. Half a drachm of laudanum-and-starch enema thrown into the rectum, and this has quieted the bowels, and the sickness is better. Pulse 120. No pain. Urine freely secreted. Her stomach now bears milk and beef-tea.

11th.—During the last three days she has been pro-

gressing very favourably in every way; but last night she was very restless, the sickness returned, and her face is anxious and drawn. Pulse 135; somewhat sharp. Has had two very loose, offensive motions; abdomen tympanitic, but there is no great tenderness. There is a fulness at the lower part of the wound, which feels rather elastic, and is tender to the touch. Tongue red and glazy. A poultice to abdomen. She can keep down champagne and soda-water better than anything else, so she takes this freely and likes it.

12th.—This morning there was a free discharge of healthy pus from the lower part of the wound; the rest has healed. She looks and feels much better. Sickness has quite ceased. Pulse 128; fair power. Bowels have not again acted.

23rd.—Since last note she has steadily improved in every way. The wound continued to discharge for three or four days, but has now quite healed, and she has no tenderness over any part of her abdomen. She is out of bed now, takes her food well, and is quite convalescent.

Medical Societies.

MEDICAL SOCIETY OF LONDON.

A good practical paper "On the Syphilitic Affections of the Throat," using that term in a wide sense, was read by Dr. Morell Mackenzie on Monday evening. The author, in fact, broke a great deal of new ground in the account he gave of his laryngoscopic explorations. The venereal affections of the trachea and larynx had, up to the introduction of the laryngoscope, been examined post mortem; but during life they had been clinically unobserved, though not uncared for. The laryngoscope, of course, now places the practitioner at an immense advantage, in that it enables him not only to examine and to watch, but also to have the freest access to the diseased surfaces that were formerly out of his reach, and to apply remedies thereto which check the progress, and remove the effects of disease, be they slight or serious. The advantage of laryngoscopy was well exemplified from an examination of a series of highly finished drawings and morbid specimens handed round the room for the Fellows' inspection. Dr. Mackenzie described in detail the various kinds of secondary and tertiary diseases seen in the larynx and pharynx. He stated that the erythematous forms of inflammation often underwent spontaneous cure. Deep ulceration in the larynx he had found to be rare; and patients in whom such did occur were often tuberculous. Mucous tubercles in the larynx were not frequent, and not recurrent; in the pharynx they were more prone to undergo ulceration. The author pronounced himself, in regard to secondary syphilitic affections of the throat, a "non-mercurialist," trusting, as he did, to inhalations of creasote, to lotions of perchloride of iron, and the application of tincture of iodine especially. Syphilitic nodules were often found in the larynx, and bore some resemblance to phthisical disease; but in the latter case deposits had a greater tendency to soften and to ulcerate, and there was more discharge. Gummy tumours of the parts about the throat were particularly mentioned as preceding deep and extensive ulceration, erosion of the cartilages, and secondary oedema. In this and other forms of tertiary disease, Dr. Mackenzie gives largish doses of iodide of potassium only. Paralysis of the muscles about the larynx, deformity from cicatrization, myositis, neuritis, and also gummy tumours at the base of the tongue, were noticed in detail, and a case of primary perichondritis was related. Difficulties of diagnosis arise when the seat of disease is in the larynx. Here syphilis, phthisis, and cancer might be confounded. In syphilis, ulceration is extensive perhaps, but there is not much thickening, and the epiglottis is the chief seat of disease. In laryngeal phthisis there is uniform thickening always preceding ulceration, and the cartilages of Wrisberg and Santorini are primarily affected. In cancer there is great irregularity, with much deposit, and the relative position of parts is altered. The disease attacks the neighbourhood of the arytenoid cartilages, and the posterior wall of the pharynx is affected. The general symptoms in each case, the temperature, the state of the

lungs, the cachexia, and various co-existences, aid, of course, materially in diagnosis. It should be noticed, perhaps, in addition, that Dr. Mackenzie gives the iodide of potassium with large quantities of water, and continues it for some time after the healing of the ulcers. He cleans the latter very thoroughly before using his caustic or astringent remedies.

Mr. H. Lee, Mr. de Méric, Dr. Tilbury Fox, and others, took part in the discussion, which was complimentary to the author of the paper, though the three speakers named differed from him specially in regard to the use of mercury in secondary syphilitic affections.

THE WEST KENT MEDICO-CHIRURGICAL SOCIETY.

THE seventh general meeting of the session of the West Kent Medico-Chirurgical Society was held on Friday, the 9th inst., at the Royal Kent Dispensary, Dr. J. C. Thorowgood, President, in the chair.

Mr. Thomas Bryant read a paper "On Suppurating Joints." He said that disease of the joints may commence in the bony or cartilaginous portions, and rarely takes its origin in the ligaments, towards their attachments. He then briefly discussed the pathology of joint disease in general, and read numerous cases of suppurating joints, including the hip, knee, ankle, shoulder, and elbow joints, which had been treated by free incisions, with the best results; in some cases there being good movement, and in others firm ankylosis.

A discussion followed, in which Mr. Lockhart, Dr. Purvis, Dr. Ralph Gooding, and Dr. Thorowgood took part; and a vote of thanks having been unanimously accorded to Mr. Bryant for his excellent paper, the Society adjourned.

Dr. Thorowgood showed a pipe, invented by Mr. Bird, for inhaling ether, chloroform, &c.

PRESTON MEDICAL SOCIETY.

THE first monthly meeting of this Society was held on Tuesday, February 6th. There was a large attendance of members. Dr. Haldan, the president (in the chair), in a short address, dwelt upon the advantages of union, and interchange of professional experience. He congratulated the Society on the hearty unanimity of their proceedings up to the present time, and assured the Society of his cordial co-operation in everything for the good of the profession.

Drs. Moore and Gilbertson read interesting reports on two cases of hydrophobia which have occurred in Preston during the past few months. Both proved fatal. The symptoms in Dr. Moore's case developed themselves 72 days after the bite, and in Dr. Gilbertson's in 67 days. Dr. Moore's case lived nearly 5 days from the first symptoms of the disease; Dr. Gilbertson's, 63 hours.

Dr. Hammond briefly mentioned a case of pneumothorax of the right side of the chest, terminating fatally in 36 hours, occurring in a case of general tuberculosis. Post-mortem examination showed the lung on the left side to be infiltrated with tubercle, the pleuræ firmly adherent; on the right side the lung was nearly healthy, but pushed up to the upper and back part of the chest.

Dr. Smith related an extraordinary case of recovery after rupture of abdomen walls, with protrusion of the bowels, in an elderly woman, who had seven years before been operated on for ovarian tumour by Mr. Spencer Wells. The rent occurred in the old cicatrix. At some future meeting, further particulars will be given of this remarkable case.

THE first and final examinations at Cambridge for the degree of M.B. will commence on the 31st of May, at 9 A.M. The second examination for the M.D., and the examination for the M.S., will begin on the 7th of June, at 9 A.M. Candidates must signify their intention of presenting themselves for examination on or before the 17th of May.

At the meeting last week of the Bromsgrove Board of Guardians, it was stated that scarlet fever and measles were very prevalent at Sidemoor and Catshill: information of this fact was directed to be sent to the Local Board of Health.