University College Hospital, with the platinum wire, made red hot by a galvanic battery, (*THE LANCET*, vol. i. 1851, p. 546.) We perceive that Mr. Hilton has been trying this plan of cutting and searing at the same time upon a naevus of the flat kind, situated in front of the ear of a child two months old. The operation was performed with Cruikshank's battery and a very thin wire, which it was first intended to tie around half the tumour, which was about the size of a crown piece. But the wire ran so easily through it, that the whole was completely removed, and the parts are now fast cicatrizing. This is rather a quicker measure than the ligature, and just as secure, since hæmorrhage is so rare.

Puncturing the Bladder through the Rectum for Retention of Urine or Stricture, when no instrument can be passed along the Urethra.

(Under the charge of Mr. Cock.)

Mr. Cock has been very successful in re-establishing the permeability of the urethra in complete retention or guttatum micturition, by puncturing the bladder through the rectum when no instrument could be passed along the urethra. Within the last three weeks two such cases were thus treated, the urethra being afterwards gradually dilated, so as to admit Nos. 8 and 10 catheters. The urine flowed for a few days through the rectum, the urethra thus remaining completely at rest. Micturition was generally satisfactory after ten or twelve days' treatment. We noticed a few days ago a third patient similarly affected; the man is forty-two years of age, a fell-monger by trade, and has had stricture of the urethra for the last four years. He was admitted January 16th, 1852, with partial retention of urine, only a few drops escaping at a time. As no instrument could be passed, the bladder was punctured through the rectum, and great relief afforded. After the canula had been left for a few days, an instrument was introduced into the urethra, and the process of dilatation is now going on, micturition becoming at the same time more and more easy. It will be recollected that this method has also been put in practice at the Royal Free Hospital by Mr. Gay, (*THE LANCET*, vol. ii. 1850, p. 59.) Mr. Cock has had constructed, by Mr. Bigg, of St. Thomas's-street, a double canula, with cranks so fixed to the upper part of the outer one, that the instrument cannot slip out of the bladder and rectum—an accident which should always be avoided, as re-introduction is extremely difficult. Mr. Cock has now operated with success on a great number of cases.

WESTMINSTER HOSPITAL.

Axillary Aneurism; Tying of the Subclavian Artery; Recovery.
(Under the charge of Mr. BARNARD HOLT.)

MR. HOLT has just discharged from his wards a patient who was admitted several months ago with axillary aneurism. The case had been sent from the country, with some doubts concerning the nature of the disease. Mr. Holt tied the subclavian artery on the right side, which measure caused the pulsations to cease, though the fluidity of the contents of the sac persisted for several months. Consolidation and absorption at length ensued, and the patient has just been discharged with the full use of his arm, and the almost complete disappearance of the tumour.

UNIVERSITY COLLEGE HOSPITAL.

Recurrence of a Cystic Sarcoma of the Breast.

(Under the care of Mr. ERICHSEN.)

WE lately saw, among Mr. Erichsen's patients, a woman, about thirty-five years of age, who presented the unusual fact of a return of a cystic sarcoma of the breast. It appears that this patient was admitted about six months ago, under the care of Mr. Erichsen, with a tumour of the right breast, which was diagnosed as cystic sarcoma. The breast was removed, and on the tumour being carefully examined, it was found completely to answer the description given by Mr. Paget of cystic sarcoma, without presenting any of the characteristics of a malignant growth. Two months after the operation, this patient came to Mr. Erichsen with a nodule which had just formed in the cicatrix. Excision of this tubercle was proposed, but the woman objected at the time, and went away.

On January 14, 1852, six months after the operation, she presented herself again, when the breast had assumed the appearance of malignant ulceration. The cicatrix is now hard, inflamed, and irregularly ulcerated; nodules of various sizes

have sprung up in different points, and the whole congested mass is indurated, hardly movable, and presents several unhealthy ulcers. The woman's countenance does not, however, bear the usual stamp of the malignant diathesis, and the glands in the axilla are not enlarged. Mr. Erichsen does not think that a second operation is advisable.

Medico-legal bearing of a Case of Self-inflicted Wound of the Throat.

(Under the charge of Mr. ERICHSEN.)

Mr. Erichsen has now under his care a man who attempted to destroy himself by cutting his throat. The patient is progressing favourably, but there is a peculiarity in the case which might have been of great importance had he succeeded in killing himself. It appears that he seized the cutting instrument with both hands, and inflicted a wound on the right side of his neck. Now it is generally held, that unless a man is left-handed, he cannot do this, and had the man died under doubtful circumstances, it might have been argued that the wound was inflicted by a second person, and suspicions might have been raised against perfectly innocent persons. Mr. Erichsen stated that a case of a similar nature was received in the hospital some years since. These facts are certainly of great value, and should be carefully noted.

ST. GEORGE'S HOSPITAL.

Great Multiplicity of Exostoses upon a Young Man.

(Under the charge of Mr. TATUM.)

On the 22nd of January, 1852, Mr. Tatum removed a prominent exostosis from the inner ankle and from the last phalanx of the left thumb of a young man about twenty-four years of age, as these two tumours were in the patient's way, and gave pain. The man presented the peculiarity of having hundreds of exostoses upon him, varying from the size of a nut to that of a hen's egg. They evidently have no tendency to great increase, but seem to multiply to a great extent. See a case under the care of Mr. Curling at the London Hospital, (*THE LANCET*, vol. ii. 1851, p. 529.)

Medical Societies.

MEDICAL SOCIETY OF LONDON.

SATURDAY, JAN. 17, 1852.—DR. MURPHY IN THE CHAIR.

MR. B. W. RICHARDSON presented several morbid specimens, removed from a patient who had died under the following circumstances. The patient was far advanced in life, (seventy-eight years of age). In the autumn of last year he suffered from symptoms of cold, with general debility, and the urine was albuminous. On the 8th of the present month, the patient again became ill in a similar manner. He did not seem to be suffering from any acute disorder, but appeared to have taken cold, and to be greatly prostrated. From the 8th to the 10th he continued in much the same condition, complaining of no acute pain, but of an uneasy sensation over the left lobe of the liver. On the 11th, the pulse continued weak, and had become irregular, and the urine was copious and albuminous. On the 12th and 13th, the bowels were relaxed, the tongue was dry, furred, and rather dark, the pulse more irregular, and the hands dark, but the intellect tolerably clear. At three A.M., on the 14th, he became violently convulsed, and during the day, lay in a semi-somnolent but restless state, with the extremities cooling, and the action of the heart becoming feebler and more irregular. On the 15th, convulsions were repeated, and the other symptoms increased in severity. On the 16th, the circulation continued to fail, until one P.M., when death took place.

Autopsy twenty-three hours after death.—Lungs large and healthy; heart dilated; its muscular structure undergoing the first stage of fatty softening. A firm, fibrinous concretion arose from the left ventricle, and extended over the arch of the aorta, sending prolongations several inches long into the vessels arising from the arch. The concretion weighed 170 grains, and entirely filled up the aortic orifice. The left side of the heart was loaded with coagulated blood. The liver, spleen, and kidneys were softened and very much altered in structure. The gall-bladder was greatly distended with a limpid fluid, and its neck was completely obstructed by three calculi. The brain and other organs were normal. The heart, the fibrinous concretion