Pirogoff's operation, which was first performed in this country by Mr. Ure, was obviously impracticable here, on account of the diseased condition of the os calcis.

Nothing could be more satisfactory than the result of the operation in this instance, as manifested by the remarkable and manifest improvement in the physical condition of the little patient.

GUY'S HOSPITAL.

CONDITION OF THE STUMP AFTER PIROGOFF'S OPERATION.

(Under the care of Mr. BRYANT.)

ON the 26th ult. we had an opportunity of examining the stump of a man on whom Mr. Bryant had performed Pirogoff's amputation fifteen months previously; and as it is not a common form of operation, it is as well, perhaps, to chronicle the result.

Mr. Bryant, in introducing the patient to his class, dwelt upon the importance of showing the results of operations, and added that he had much pleasure in bringing before their notice the man upon whom he had performed Pirogoff's amputation, as the result had been so entirely satisfactory. The patient was thirty years of age, and the foot had been removed for rapid disorganization of the tarsal joint. The stump, as might be seen, was quite perfect, any amount of pressure being tolerated without the slightest pain or inconvenience being experienced. The man could walk and take exercise as well as ever, and could support the weight of the body upon the amputated limb as well as on the sound one; indeed, as the patient expressed it, the limb was just as good as its fellow for all purposes of support.

Mr. Bryant explained that "Pirogoff's" amputation at the ankle differed from "Syme's," in which the divided extremities of the tibia and fibula were only protected by the integument of the heel, by the fact that in the former the extremity of the os calcis was also retained, which, in the case before him, had become firmly united to the resected extremities of the tibia and fibula. By this operation not only was the natural pad of integument preserved, but the bony heel itself was maintained; and the inconvenience and distress too often experienced by persons upon the divided extremities of the bones were done away with. He did not think that anyone, after examination of this stump, could doubt which was the better of the two operations, and added that in all cases in which amputation at the ankle was required, Pirogoff's operation should be preferred if it could be performed.

ENLARGEMENT OF THE LIVER CONSEQUENT UPON FORMER ATTACKS OF DYSENTERY; SUSPICION OF THE PRESENCE OF SMALL ABSCESES.

(Under the care of Dr. OWEN REES.)

When dysentery has become chronic, it is often associated with abscess of the liver. In the present instance, enlargement of the liver commenced on the patient's return home, and after the dysenteric symptoms had apparently ceased. If abscesses do really exist as supposed, they can hardly be attributed to the dysentery, but most likely to some change in the condition of the hepatic structure itself favourable towards their development. The notes of the following case were taken by Mr. J. J. Phillips:—

James C—, aged thirty-nine, a blacksmith, admitted September 25th. In 1852, when in Constantinople, he had a severe attack of dysentery, which lasted for eleven weeks. Two years afterwards he had another attack of twelve weeks' duration in the same place. At Alexandria, after the lapse of another two years, he had a similar attack. Each time it was more severe than the preceding. He has often noticed his urine to be high-coloured and turbid, and felt considerable pain in the kidneys. After returning home he found his liver began to swell, and he complained of much nausea, and was often sick. His motions contained a good deal of what appeared to be bile; after these he always felt relieved. He had at intervals acute stabbing pain passing from the upper part of the right side to the lower part of the left side of the liver, and it has always been very painful on pressure when these attacks came on. He complains also of pain between his shoulders and in the frontal region, with great dizziness, and at these periods the bowels are costive. The stools are either dark or clay-coloured; urine high-coloured and thick; great thirst; often has cold shivers, even when free from these attacks; the legs are slightly swollen; there is a great deal of flatus. This patient has been admitted

to this hospital five times before, under the care of Dr. Rees twice, Dr. Habershon twice, and Dr. Wilks once.

Sept. 26th.—He presents the usual symptoms of the attacks he has been subject to, and described above. The liver is very much enlarged; the pain is not constant, but very acute; urine normal; pulse 80. To have a linseed-meal poultice over the hepatic region; five grains of compound rhubarb pill every night, and a julep of nitric acid three times a day.

Oct. 1st.—The patient is doing well. Poultice to be continued.

4th.—The liver is much less enlarged, and he is allowed to walk in the park.

This patient continued to progress favourably, and left the hospital much relieved on the 12th. Dr. Rees suspects the formation of little abscesses in the substance of the liver.

ST. BARTHOLOMEW'S HOSPITAL.

INTENSE CONGESTION OF THE LIVER, SIMULATING AN ABDOMINAL TUMOUR; ICTERUS; RECOVERY.

(Under the care of Dr. FARRE.)

IN hyperæmia or ordinary congestion of the liver, the viscus is necessarily more or less distended, and an evident fulness of the organ can be distinctly detected by physical examination. If the engorgement be extreme, with considerable enlargement, jaundice may be associated with it.

In a case recently under Dr. Farre's care, the liver at first actually simulated an abdominal tumour. The patient, Alex. E—, aged forty-eight, was admitted Oct. 17th, 1861, with jaundice. This symptom had been present six weeks, and co-etaneously with it appeared a distinct tumour in the epigastrium. On examination, a prominent swelling was noticed in that region, possessing an indistinct feeling of fluctuation, but it was found to be continuous with the liver. The motions were not bilious, but were of a clay colour, and the urine looked like pure bile. Three grains of blue pill and two of Barbadoes aloes were ordered every night. By the 25th the hepatic tumour was less, and the icterus was disappearing. On Nov. 4th the urine was clearer and full of lithates. The conjunctivæ were the only parts observed of a yellow colour.

Nov. 11th.—Although the pills have been continued up to this date, the mouth is not sore. The urine and stools are natural, and the patient is convalescent.

A few days afterwards he left the hospital. The result of the case clearly proved that the swelling was from a highly congested liver.

EXOSTOSIS ON THE OUTER SIDE OF THE LOWER PART OF THE FEMUR; SUCCESSFUL REMOVAL.

(Under the care of Mr. WORMALD.)

A lad, aged about sixteen, was admitted a few days ago with a bony tumour in a rather unusual situation, and one that proved very inconvenient. It was on the outer side of the left femur, about three inches above the knee, and had been growing slowly for some time. Its size was that of a walnut. On the 30th ult. chloroform was given, and the tumour removed with a pair of cutting forceps, through a free longitudinal incision. Its base was pedicular and bony, whilst its surface resembled cartilage. The wound was closed by a strip of plaster, and the boy is doing well.

UNIVERSITY COLLEGE HOSPITAL.

EXTENSIVE WOUND OF THE LARYNX AND NECK, FOLLOWED BY AN AERIAL FISTULA; CLOSURE OF THE LAST.

(Under the care of Mr. ERICHSEN.)

At the present time there is a case of some interest in this hospital, considering the sex and the age of the patient. Mary R—, fourteen years of age, but in appearance quite seventeen, by occupation a sempstress, was admitted October 16th, 1861, with an extensive wound in the neck. The history of her case was somewhat obscure, but from what could be made out it appears that in a fit of excitement at Tottenham, where she resides, she seized a carving-knife in her right hand, and inflicted a wound on the neck between six and seven inches long, commencing an inch posterior to the left angle of the lower jaw,