Making a semicircular incision two lines from the diseased part, and entirely circumscribing it, the whole growth was dissected away down to the mucous layer, this being preserved intact, then paring away the remains of all suspicious tissue with the scissors. Notwithstanding the wound left by the ablation of this tumour, it possessed that continuity of surface and tissue which greatly facilitated, or perhaps rendered possible, that approximation of its edges, which, with some tension of the parts, were brought carefully together and held united by hare-lip needles, secured by a figure-of-eight suture. Two delicate silk sutures were then added. One at the mucous border of lip, the other at the lower extremity of the wound, which now presented a perfectly vertical line corresponding to the raphe of the lip. The only dressings were compresses dipped frequently into cold water, during five days, when, after scarcely any suppuration, the wound was almost entirely healed. Though the mouth is drawn smaller, there exists not the slightest deformity.

Prof. Michell calls attention to the chief feature of the operation, which consists in the preservation of the entire mucous membrane, which, with more or less available and useful integument, is completely sacrificed for the smallest tumours in the classic V incision invariably practised. He says: "In commenting on this preservation of the mucous layer, I wish to revive, if possible, a modification of the usual operation, so wholly neglected that perhaps few if any writers on surgery refer to it. Though practised more than half a century ago, no one, if we except Mr. Syme, seems to have considered it, and even his endorsement, completely substantiating its results, has not evidently met with any kind of notice even in the most elaborate works before us."

"In advocating," says Prof. M., "then, this most useful advance in conservative surgery, made practicable in the simple retention and employment of an entire mucous layer, I must be understood as restricting this method absolutely to canceroid disease or epithelioma, as Hannover termed it, which is different from cancer.

"I would not have it understood that I reject altogether the Celsian V incision, for in limited growths or small tumours it is the obvious duty of the surgeon to give his patient a clean cut, when he simply thereby converts the wound into an artificial hare-lip of easy adjustment; but I advocate this mode of operating as well calculated to allay the embarrassment and apprehension of those who, in presence of an epithelioma invading half, or it may be the whole of the lip, are necessarily led to contemplate the irremediable gap, which nothing but some cheiloplastic operation, as bold as the formidable procedure of a Dieffenbach through cheek and chin involving facial artery and nerve and possibly parotid duct, could fill; or some modification of a like kind with its attendant sequelae, erysipelas—an alarming source of failure in plastic surgery; erythematous inflammation, oftentimes troublesome and painful; not to speak of a yet more frequent source of disappointment, after-contractions.

"Too much importance cannot be given to the retention of the entire mucous membrane of the lip, since a basis is furnished under all circumstances for an outgrowth of granulations from a perfectly healthy layer of subjacent tissue in a vast majority of cases, even of the third and worst variety of the disease."

Poisoning by Aconite and Chloroform.—Dr. J. E. Blake, reports (New York Med. Journal, April, 1875) an extremely interesting case of this. The subject of it was a young lady, who, by mistake, took more than one drachm of a mixture containing equal parts of tincture of aconite root and chloroform. Dr. B. saw her about fifteen minutes afterwards, and before any symptoms of poisoning were manifest. Emetics, and afterwards the stomach-pump, were resorted to, without arresting the lethal effects of the poison, which soon appeared, and were rapidly increasing in intensity. Dr. T. Gaillard Thomas was called in consultation, when galvanism, artificial respiration, and the inhalation of oxygen gas, warm applications, stimulants, hypodermic injections of atropia and of cognac, etc., were most perseveringly employed, though the condition of the patient seemed to denote the hopelessness of all efforts to save life, the pulse having ceased, and nothing but a feeble, uncertain flutter could, with difficulty, be made out over the region of the heart, so that for nearly half a
minute one of the medical attendants supposed the patient dead. The unflagging application of the remedies mentioned, for sixteen hours, finally proved successful. The perseverance of the physicians under such discouraging circumstances is in the highest degree creditable to them, and should admonish us never to despair in the apparently most desperate circumstances.

Comparative Mortality of the White and Coloured Populations of Richmond, Va.—The Virginia Medical Monthly, for June last, contains some interesting remarks on this subject by Dr. L. S. Joynes, Secretary to the Virginia Board of Health.

In longevity and reproductive power, Dr. J. considers that we have evidence that the coloured race, in a congenial climate, is quite equal to that of the white races.

"With regard to the mortality of our coloured population in Richmond," he remarks, "it is worthy of note that it is most disproportionate during the early years of life, when the influence of causes tending to impair nutrition and depress the vital powers is most sensibly felt. Thus, under the age of 5 years, while the deaths among the whites amount to 42.12 per cent. of their total mortality, among the coloured population they amount to 47.05 per cent. of the whole. But this excess continues during the whole period of growth; for no less than 56.58 per cent. of the deaths among the coloured take place under 20 years of age, against 49.24 per cent. among the whites. After the age of 20, the excess of mortality, though it does not disappear, becomes comparatively small."

The excess of still births among the coloured population he says is "truly enormous." Thus, "that while among the whites there was 1 child still-born to every 18 born alive, among the coloured there was 1 to every 7.

"There are several obvious causes which may be specified as occurring to produce this great disproportion, and which will suffice to account for the facts, without the need of any questionable assumption as to the influence of race."

"First. Among women engaged in laborious and menial occupations, a much greater number of abortions and still-births will be likely to occur from accidental causes—such as falls, blows, strains of the abdominal muscles, etc., than among women leading easier and quieter lives.

"Secondly. Wherever the general standard of health is lower, and the death-rate higher, there will be a greater chance of the foetus dying in utero, as the result of disease in the mother reacting upon the foetus; and it is quite possible that fatal disease may be induced in the foetus by unwholesome surroundings of the mother (bad air, etc.), even though the latter escape any serious attack of disease.

"Thirdly. Syphilis in one or the other parent is probably now a more frequent cause of the death of the foetus among negroes than among whites.

"Fourthly. When girls commence the office of child-bearing prematurely, before the full development of the pelvis and the soft parts concerned in parturition, a larger proportion of the children of the first labour will be born dead than when women reach full maturity before becoming mothers; and it is well known that premature child-bearing is far more common among the negroes than among the whites.

"Fifthly. A very decided influence upon the proportion of still-births results from the fact that the great majority of negro women are attended in labour by incompetent midwives, wholly unskilled in the management of the difficulties and complications of labour, and ignorant even of the means of preventing the loss of the child from mere delay in its expulsion.

"Sixthly. There is strong reason for the belief that a certain, perhaps a considerable, proportion of the still-births reported are not still-births at all, but cases of infanticide, whether by the infliction of actual violence, or by the omission of the necessary care of the new-born child."

No. CXXXIX,—July 1875.