recovery from the lung trouble the legs for the first time began to swell. The anasarca was increasing when the patient insisted on leaving the hospital.

A case of *anasarca* and *anæmia* in a man. There was enlargement of the liver and spleen, with increased vocal resonance in the lungs, especially the upper part of the left one, loud expectoration, and feeble inspiration. The heart was natural; urine abundant, and of specific gravity 1016 and 1013, no albumen detectable. At first frequent vomiting and purging occurred. Much improvement took place under meat diet, diuretics (taraxacum and broom), and, later on, the carbonate of iron pill.

A slight case of *enteric fever* of ten days' standing, in a girl nineteen years of age. On admission it was like a case of febricula. There were no rigors, tenderness of the abdomen, or diarrhoea. After frequent search a few doubtful spots were found only fourteen days after admission, but the evening rise of temperature marked the case. Recovery was effected under citrate of ammonia and salines, with soda-water and small doses of brandy.

A case apparently of *hysteria* in a child aged twelve. She had refused solid food for eighteen months, and had lived chiefly on sweets. On admission she lay cramped up in bed, complaining of intense pain in the abdomen, with her eyes constantly closed or half closed, as if light gave pain. The expression of pain was always exaggerated when she was watched or spoken to. She was very thin and weak, but no actual disease of any organ could be determined, and the temperature has been natural. Under proper food, with steel and quinine, valerian, and a little stimulant, she has much recovered already. She has been made to use her muscles, and to sit up near the window watching the "row" in the park, and has had shower-baths. She is eating solid food now, and taking cod oil, and is increasing decidedly in weight.

The tumour had undergone a very marked diminution in size, and presented no return of pulsation.

George N—, aged forty-nine, had observed a swelling behind the left knee four months before admission. It gave him no pain or inconvenience for some time, but, with certain intervals of partial subsidence after rest, continued to increase steadily. During the last four weeks he had lost flesh and strength to such an extent as to be unfit for work. The tumour was found, on admission, to be of about the size of a hen's egg, fusiform in shape, distinctly circumscribed, and subject to a strong expansive pulsation following perceptibly after the pulse beat of the femoral artery. The cardiac and pulmonary sounds were normal; the radial arteries slightly, and the temporal arteries very tortuous; an incipient arcus senilis was to be observed. The femoral artery was tied in Scarpa's triangle with a hempen ligature, and the wound was dressed with carbolised lint after the edges had been brought together with silver sutures. The limb was enveloped in cotton wool, and bandaged. A quinine draught was ordered to be taken twice a day, and castor oil to be taken at intervals to counteract a tendency to constipation. On the second day there was some sickness. Three of the sutures were removed on the third day, and the remainder on the fifth. The ligature was removed on the twentieth day. The patient made a good recovery, with marked diminution in the size of the tumour.

EXTENSION OF FRACTURED THIGHS BY MEANS OF AN ELASTIC SPRING.

The accompanying woodcut shows how the above principle is at present applied at St. Bartholomew's Hospital by means of an instrument designed by Mr. Cripps, one of the dressers. An ordinary long splint is provided with a pair of pulley wheels near the upper part, a single one at the opposite extremity, and a row of pegs on the lower half

ST. BARTHOLOMEW'S HOSPITAL.

TWO CASES OF POPLITEAL ANEURISM TREATED BY LIGATURE OF THE FEMORAL ARTERY.

(Under the care of Mr. SAVORY.)

We are indebted to Mr. P. Butler Stoney, house-surgeon, for the particulars of the following two cases.

Phineas Y—, aged thirty-three, a surgical instrument maker, felt pain in, and stiffness of, the right knee, about six weeks before admission. As the pain became less, a swelling appeared at the posterior part of the joint, and steadily increased in size. On admission, an oval pulsating tumour, of about the size of a small melon, was found to occupy the right popliteal space. Pulsation, uniform throughout the tumour, was distinctly appreciable to the eye and touch. The posterior tibial artery pulsated at the ankle; the radials were not tortuous; the heart-sounds were normal; there was no arcus senilis, nor oedema of the leg or foot. The general health was good. The patient complained of neuralgic pains in the leg and foot. After division of a thick layer of subcutaneous fat, the femoral artery was ligatured at the apex of Scarpa's triangle. The edges of the wound were brought together with silver sutures; it was dressed with carbolised lint, and the limb was wrapped in cotton wool, bandaged, and flexed. On the morning following, the patient had a rigor, and suffered some nausea; but these symptoms were followed by no unfavourable result. On the third day the temperature of the bandaged limb was 99° F.—two degrees higher than that of the sound one. The ligature came away on the eighth day. On the forty-third day the patient was moving about the ward. A slight discharge oozed from the wound.

of the outer aspect for the attachment of the spring and the regulation of the degree of tension. The extremities of the perineal band are attached to the ends of a doubled string, which plays over one wheel of the double pulley and passes to its attachments over the two upper wheels in the splint. Another string is attached to one end of the spring, passed over the other wheel of the double pulley, and then over the wheel at the lower extremity of the splint, where it is fastened to a stirrup which has been adapted to the patient's ankle. Thus the elastic tension of the spring is brought to bear in an opposite direction upon the two extremities of the limb. The contrivance seldom needs readjustment, and, when it does, the object is readily effected by moving the spring from one peg to another. Three fractured thighs have been treated by its aid at St. Bartholomew's Hospital, and in each instance union has been effected without shortening.

PROVINCIAL HOSPITAL REPORTS.

MANCHESTER ROYAL INFIRMARY.

LIGATURE OF THE EXTERNAL ILIAC ARTERY FOR FEMORAL ANEURISM.

(Under the care of Mr. LUND.)

THE patient, who was forty-two years of age, had an aneurism high up in the course of the left common femoral artery. He stated that fourteen months before he had had pressure applied continuously for thirty-nine hours above Poupart's ligament, which caused a diminution in the size and pulsation of the tumour, but was followed by a slough-

ing sore, which after a time healed up, leaving a large white firm cicatrix.

For about a year previous to his admission he had been without treatment, and the tumour had been slowly increasing.

The operation of ligature of the external iliac artery was rendered tedious by the large quantity of subcutaneous fat, and the adhesion of the anterior wall of the sheath to the superjacent tissues. An antiseptic catgut ligature was employed, and was cut off close to the vessel. The wound was closed with antiseptic silk sutures, and was then dressed with lac plaster.

On the removal of the sutures, on the eighth day, the wound was found to have healed in its entire extent, except at one angle where it dipped into the cicatricial tissue. The dressings were changed eight times, carbolic muslin being substituted for the lac plaster on the last two occasions. No pus whatever was secreted, not a single bad symptom occurred, and the patient was sitting up on the twenty-sixth day.

WEST NORFOLK AND LYNN HOSPITAL.

LIGATURE OF THE EXTERNAL ILIAC ARTERY FOR FEMORAL ANEURISM.

(Under the care of Dr. LOWE.)

W. M.—, aged twenty-eight, a tailor, recently discharged from the army, a man fond of athletic sports, and a good runner, but of intemperate habits, was admitted with a marked tubular dilatation of the femoral artery, of a uniform diameter of an inch and a half, and extending two inches and a half from Poupart's ligament. His attention was first called to it by a sudden onset of severe and continuous pain on the morrow of a debauch. He had always enjoyed good health. What with the administration of digitalis and sulphate of magnesia, and rest in bed, he remained free from pain for three days; but it returned with its former severity on his drinking a glass of beer; it was more severe than elsewhere at the knee. Under the continued use of digitalis a slight diminution took place in the size of the aneurism, and the throbbing became considerably less.

The necessity of an operation having, however, become obvious, an incision about three inches in length was made after Cooper's method. The vessel was tied about an inch above Poupart's ligament with a silk ligature, the ends of which passed through the incision. The wound was washed with a solution of carbolic acid, closed with silver sutures, and dressed with carbolic oil. It healed by first intention, except at the point of exit of the ligature. It discharged very little pus, and that of a healthy character. Up to the thirty-sixth day the ligature showed no disposition to come away, although frequent traction was made upon it. It was therefore attached to a thin india-rubber band which was fixed by strapping, at a moderate tension, to the thigh. Four days later it came away. The remainder of the wound speedily closed, and the patient was discharged. Sixty-five days after the operation he was found to be walking about as usual, and reported himself quite well. The aneurism had shrunk to about the thickness of a finger.

Reviews and Notices of Books.

Essay on Growths in the Larynx: with Reports of one hundred consecutive Cases treated by the Author. By MORELL MACKENZIE, M.D. Lond., &c. With numerous illustrations. London: J. and A. Churchill. 1871.—Since his gaining the Jacksonian prize for the best essay on "Diseases of the Larynx," in 1863, Dr. Morell Mackenzie has continued to study the nosology of that region, and with a success that has placed him high amongst the best authorities on the subject. In two publications he has treated, first, of the Nervo-Muscular Affections of the Larynx; and second, of Laryngeal Growths. The former is sufficiently well known to our readers to absolve us from further mention of it here; while the latter may be pronounced to be a yet more

valuable contribution to the literature of its special subject. Dr. Morell Mackenzie gives, we are glad to see, a lucid narrative of the various researches which, as often indirectly as not, have gone to the advancement of laryngeal pathology and therapeutics. While tracing to the discovery of Czermak the source of all recent improvements in the diagnosis and treatment of the affections of the larynx, he does full justice to those antecedent and contemporary workers who have contributed in any way whatever to the common fund of enlightenment on the subject. Seven sections exhaust the history, the causes, the symptoms, the diagnosis, the pathology, the prognosis, and the treatment of laryngeal growths—the last of all, that on the treatment, being particularly commendable for the clearness and practical force of the directions as to laryngotomy and tracheotomy respectively. Perhaps the appendix, however, with its report of the cases treated by the author and others, will have most interest for the profession, as showing the various affections with which laryngeal growths may be accompanied, or in which they may have their origin. Dr. Morell Mackenzie, indeed, has earned the thanks of every practitioner for his very useful volume. While a most accomplished expert in his own department, he also shows his possession of what has been well called the "complete professional mind."

Affections of the Throat and Larynx. By ARTHUR TREHERNE NORTON, F.R.C.S., Assistant-Surgeon and Surgeon in charge of the Throat Department at St. Mary's Hospital. Large 8vo, pp. 39. London: Hardwicke. 1871.—This unpretending little work, though not comparable to that of Dr. Mackenzie, contains at the same time some useful matter. The book is a reprint in the main of papers that appeared in THE LANCET, and it gives a classification, brief description, and statistical information relative to 150 consecutive cases which applied for treatment at St. Mary's. A note on the mode of applying the laryngoscope precedes the clinical description of individual diseases, and is short and to the point. The brochure will be found useful, especially for beginners in laryngoscopy.

Personal Experience of Lithotomy in India. By WILLIAM CURRAN, L.R.C.P. Edin., M.R.C.S., Asst.-Surg. Army Staff, &c. (Reprinted from the *Dublin Quarterly Journal*, May, 1871.)—This reprint contains information that will be more or less new and interesting to surgeons unacquainted with India and Indian surgery. Mr. Curran is evidently a practical man, who dislikes the application of refined and subtle processes of investigation and modes of practice where the end can be attained by methods that are simple, ready of application, and easy of comprehension. After discussing the probable causes of the prevalence of urinary calculus among the natives of India, and the reasons why lithotomy is likely to be preferred by them to lithotomy, he cites a list of 84 operations by Dr. G. Grant, at the Futtehghurgh Dispensary, N.W.P. of India, all of which were successful; and he then proceeds to describe the very simple, and apparently very successful, methods of operating pursued by the native surgeons for the removal of stone in the bladder. There is certainly some force in his remarks as to the influence—embarrassing rather than otherwise—of the very minute and circumstantial details into which some authors are so fond of entering when describing this operation. He says that, had some of the writers witnessed, as he has done, the facility and readiness with which it is performed by the natives of India, who never opened a book on anatomy, and know as much about the verum montanum as they do about the man in the moon, they would be less exacting in their requirements, and more disposed to trust to the commonplaces of surgery and the dictates of common sense. Be this as it may, the description of the rough and