Lastly, it should be stated that cystine deposits have been observed in some cases to continue for years without seriously affecting the health. The great danger to be apprehended in such cases is the occurrence of stone.

I now propose to bring these lectures to a conclusion for the present, resuming them at a future period. In the next articles I shall treat more particularly of sugar, hippuric, oxalic, lactic, phosphoric, and sulphuric acids, in the urine. The suspension in the publication of the lectures will afford me the opportunity of devoting more time to the preparation of the work already announced, entitled "Illustrations of Urinary Pathology."

Wimpole-street, Cavendish-square, June, 1858.

REPORT OF A CASE OF

FRACTURE OF THE SKULL, WITH SEVERE INJURY OF THE BRAIN; RECOVERY.

By WILLIAM SMITH, Esq., M.R.C.S. ENG.,
Chesterfield.

At three P.M., on the 1st of February, 1858, I was called to see J. H.—, who was reported to be dying from a wound in the head, caused by the bursting of a gun. The man lives about three miles from my residence. He is a collier, aged thirty-eight.

State on first inspection.—I found the patient in bed; the face collapsed and pale; the pulse slow and weak. He did not answer my questions, yet appeared from subsequent indications not altogether insensible. On removing the bloody rags with which the head was enveloped, I found a large triangular wound about half an inch above the left eyebrow. From this wound protruded a portion of brain and some clotted blood, which also distended the skin around. There was considerable elevation of the skin in the neighbourhood of the wound. (I just remark in this place that the accident had occurred about four hours before I saw him.) On removing the brain and clotted blood, I came on several small pieces of comminuted bone, and, on further examination, a hole through the frontal bone about the size of a florin. Through this I found I could easily introduce my finger into the cavity of the cranium, and found the brain apparently much broken down and mixed with other small fragments of bone, which I carefully removed. The depth of the cavity admitted my forefinger to its whole length, and a probe three inches and a half long could be passed without meeting the slightest obstacle.

Previous history of the case.—In firing a gun at a small bird, the weapon burst, and (probably) a piece of the lock of the gun was propelled with enormous force against the forehead. It was a subject of surprise to me that a projectile penetrating so deeply, and inflicting such a wound, should not have lodged in it, but it was partially explained by the fact that the man wore at the time a stiff felt cap, and this was perforated. He immediately drew it off after the accident, and probably in doing so he pulled out the instrument, whatever it was, with the stiff and unyielding edges of the cap. He walked home, a distance of about fifty yards, the bleeding being profuse, and several small portions of brain falling from the wound as he coughed on the road. Having cleared out all portions of bone I could reach, I ordered a wet pad to the wound, and left him. —Seven P.M.: He is not quite so collapsed, and the pulse has somewhat recovered itself. Considerable bleeding from the wound, which I again examined, and removed from it two or three more small pieces of bone.

Feb. 7th.—The patient slept at intervals during the night. He vomited freely towards midnight, and the clot of blood in the wound was thrown out with considerable force, and some hæmorrhage followed. This morning the skin is warm, and the pulse but soft, about 70. I directed them to apply assiduously cold spirit lotions to the head, to give him five grains of calomel every fourth hour, and an aperient mixture of sulphate of magnesia, &c. He passed his fæces and urine involuntary during the night. He can with difficulty be induced to answer any question, and complains much of pain in the back.

8th.—He is to-day quite sensible, but apparently scarcely aware of his dangerous condition. He feels some pain in the wound, but not so much as on the preceding day. Wishes to get up and have some dinner; pulse 70, full and soft; bowels

have been twice relieved, and he has passed his urine. On both occasions he discharged these functions properly. There is not the slightest trace of any paralysis of the voluntary muscles. The tongue is rather white and furred, but at the same time moist. Ordered to continue cold lotion to the head; to take the aperient mixture and one grain of calomel every fourth hour.

9th.—Continues quite rational, and appears to improve. The tongue cleaner; pulse slow, 60. The pain in the wound less, but there is some deafness of one ear, and a confused feeling on the left side of the head. The bowels have been open once since last report. The wound occupied still with a large clot, which I have not disturbed since the day of the accident. His wife states he has slept soundly during the night, and snored loudly, (stertorous breathing?) The pupils are slightly dilated. There is considerable ecchymosis round both eyes, particularly the left. To continue calomel powders, purgative mixture, and cold lotion.

10th.—Complains of much pain about the wound, and during the night his wife says he appeared partially delirious, was frequently passionate with her for slight circumstances, and twice attempted to get out of bed. The tongue is clean, the pulse slow (60), but there is still much excitement in his look and manner. Ordered six leeches to the forehead; to continue the aperient mixture and the calomel powders.

11th.—The pain in the head has been relieved by the leeches, the wounds from which have bled freely. He complains much of weakness, and expresses a desire for something more substantial than the milk diet to which I have limited him. Pulse slow and soft, 56; tongue clean. To have broth for his dinner; to apply a small poultice to the wound, which is dry, and exhibits no indication of suppuration; to omit the aperient mixture and the powders, as the bowels have acted freely the day before, and the gums are slightly tender.

12th.—Seems very comfortable, and says he has been much better since taking the broth. Pulse slow, 56; tongue clean. Has had a very good night. The wound looks scarcely so dry, there being some little action about the edges. To apply a poultice of equal parts of bread and oatmeal.

13th.—This day I was unable to see him, but I received a message that he was not so well, and had much pain in the head and back. Ordered an aperient mixture and one grain of calomel night and morning.

14th.—Is better; suppuration is freely established, and he is in all respects doing well.

17th.—Removed another piece of bone from the wound to-day; two more subsequently came away in the poultice.

The case from this period went on well, and the wound was gradually healed, the pulsation of the wound being, however, very evident through the thin cicatrix which covers it. He is at this date (April 8th) quite convalescent, with the exception of debility and occasional pain in the back. The cicatrix is depressed, but not remarkably so.

Remarks.—This case exhibits to a wonderful degree the serious amount of injury which may be inflicted on the brain and yet recovery ensue. It scarcely bears out the views of phrenologists, as, even assuming the brain to be a double organ in all respects, we should certainly expect to find more mental disturbance than was shown in the present case.

Chesterfield, 1858.

ON A CASE OF DISLOCATION OF THE KNEE-JOINT.

By HENRY JACOBS, Esq., M.R.C.S. & L.A.C.

COMPLETE dislocation of the knee-joint is, I believe, of exceedingly rare occurrence, although it sometimes happens. In this instance the patient was a strong countryman, about six feet high, who was assisting a horse with its load of coal up hill, by pushing with his shoulder at the tail end of the cart, when the fore feet of the animal came on a wet spot in the road, and immediately slipped under him. On the horse regaining his feet, the load, which had been taken momentarily off the shoulder of the man, again fell heavily back on it, while his leg was yet in the extended position, the lower end of the femur was by this circumstance thrown in front of the head of the tibia, and the head of the latter into the ham. The deformity was very great; the leg was flexed upon the thigh; and all traces of the patella were lost in the swelling.

Some time having elapsed previous to my seeing the man, this circumstance will account for the great difficulty I ex-