and had partially healed. She was given calomel and opium every six hours.

The wound looked healthy, very weak; tongue dry; and she was in a very low state. There was more tenderness over the abdomen. The edges of the wound were of a dark colour. The calomel and opium were repeated every three hours, and she was also given brandy and port wine; but towards evening she sank.

The autopsy showed the following:—The peritoneal cavity contained much blood, reaching as high as the small omentum, and coating the various viscera; but the largest quantity was in the pelvis. The gut and omentum that had been strangulated were lying at a distance from the femoral ring, five feet from the ilio-caval valve, and were evidently recovering themselves. No vessel could be found wounded, except a very small one which was given off from a branch of the epigastric artery.

CASE 2.—A. F., aged fifty-two, was admitted, on July 10th, under Mr. Prescott Hewett's care, for strangulated femoral hernia. She had had a hernia on the left side for the last ten years, for which she had always worn a truss. When it came down she could never return it herself, always requiring the aid of a medical man; and this reduction gave her much pain. Five years ago she was in Guy's Hospital for symptoms of peritonitis, but the gut was then returned by means of a hot bath and taxis. It had not been down since last November until three hours ago, and directly afterwards sickness came on. Hot baths and taxis were tried, but in vain; so, five hours after the firstepisode an operation was performed.

The sac was opened, and found to contain nothing but a small knuckle of intestine, not very dark in colour, and in about half an hour she died. An autopsy showed the following:—The peritoneal cavity contained much blood, reaching as high as the small omentum, and in the pelvis. A band of lymph encircling three little vessels was observed, and in about half an hour she died. An autopsy showed the following:—The peritoneal cavity contained much blood, reaching as high as the small omentum, and was inflated with carcinomatous material, and the latter was given off from a branch of the epigastric artery.

CASE 3.—E. Y., aged fifty-one, was admitted, on August 17th, under the care of Mr. Tatum, for severe constipation and stercoraceous vomiting, she having suffered from the former for the last six days, and from the latter for about twenty-four hours. Until the day of her admission she had applied to no one; but, on that day, she consulted a medical man, who gave her an enema, but the whole of it was directly returned. She stated that she was four months advanced in pregnancy; she had never affected the hernia in any way. The bowels had not acted for five days, and since then she had been frequently vomiting. An operation was performed immediately. On dividing the stricture, which consisted of a large piece of omentum encircling a small knuckle of the transverse colon, a vessel of the size of a crow-quill was cut across. The divided ends were so situated that there was some considerable difficulty in securing them; for one was attached to the omentum, whilst the other was lying on the surface of the gut, thereby rendering it very difficult to take up the latter without injuring the bowel. A little sloughing of the integuments followed the operation, and slight peritonitis resulted. She was then recovered from these, and on August 30th left the hospital.

GUY'S HOSPITAL.
LEUCOCYTHEMIA SPLENICA.
(On the care of Dr. Wilks.)

To the student who has to make himself familiar with the different varieties of disease, it is important sometimes to be enabled to examine a typical case, especially when it may happen to be one of the rarer forms. This opportunity is at the present time afforded by a young man twenty years of age (but who has the appearance of a lad of fifteen), in Guy's Hospital, who was admitted on the 16th of July, and who is labouring under the disease described by Dr. Hughes Bennett, of Edinburgh, as Leucocythemeia, which is characterized by an excess of white corpuscles in the blood, supposed to depend on some diseased condition of the spleen. Aneurin, in Sussex, there is considerable enlargement of the spleen (which is quite prominent), associated with an excess of white corpuscles in the blood and a normal quantity of the red. No other diseased condition of body has been observed, although at the present time he has a cough, resulting from a recent cold. He has not suffered from ague, but is now taking six grain doses of quinine every four hours, with the application of the compound iodine ointment to the left side over the enlarged spleen. This affection has the name of splenica affixed to it to distinguish it from the Aneurina lymphatica, a disease which was illustrated in our "Mirror" of the 27th August, and in which, as we had occasion to mention, there is no excess of white corpuscles. The expression "leucocythæmia lymphatica," therefore, is contradictory in itself, and must yield to the one adopted by Dr. Wilks, which we have already brought before the notice of our readers.

CARCINOMATOUS GROWTH OVER THE FRONT PART OF THE CRANIUM; SUCCESSFUL REMOVAL.
(On the care of Mr. Bryant.)

At first sight, the series of irregular prominence on the front part of the head of the patient who was the subject of the following case might have been taken for a number of sebaceous tumours of the scalp on the eve of suppurring, but very shortly after operative proceedings were commenced, their true nature was discovered to be carcinomatous, and as much of the disease was taken away as the safety of the patient permitted. A wound exhibiting less promise of healing we have seldom seen; nevertheless, as stated in the notes of the case, the edges of the diseased skin were the first to unite by adhesion, and ultimately the woman left the hospital quite well, with no appearance of a return of the disease, although it must be looked for at a later period.

H. C., a healthy-looking woman, aged twenty-four, was admitted under the care of Mr. Bryant on the 1st of June last. She had always enjoyed good health, and three years previously she first observed a tumour over the left frontal eminence, about the size of a small nut, and quite movable. Two or three months afterwards she discovered several others over the left parietal bone, and these had been gradually enlarging. When admitted, there was a large irregular tumour over the left parietal bone, about the size of a flat; it presented an uneven and nodular surface, was closely connected with the integument, and was capable of being readily drawn down to the skull. Upon manipulation, it gave a tense, semi-elastic sensation, and caused but little pain.

At the patient's express wish, the tumour was excised, although its character was very doubtful. On the first incision, the nature of the growth was clearly manifested. The skin was in parts infiltrated with carcinomatous material, and the bone was exposed and rough. As much of the tumour as could
be removed was taken away, and the edges of the wound ad-
justed. This subsequently healed kindly, although the por-
tions of the disease which were left were in a progressive con-
dition.

There is one point of interest connected with the healing of
the wound—namely, that the only part which united by primary
union was the diseased one; the healthy edges granulating.
This has now been seen to take place upon several occasions,
and it appears to point out the extreme activity of the cell
development, as this union must have taken place through cell
structure and those especially which are called malignant.

CLINICAL RECORDS.

THE EARLY REMOVAL OF GLOSSAL CANCERS.

When a malignant growth upon some part of the tongue has
not only increased in size, but has become perhaps extensively
ulcerated, the difficulty of complete removal is at once appa-
rent, and we most commonly have recourse to other measures,
which sometimes, although rarely, may prove curative. The
powdered sulphate of copper, as locally used by Dr. Marsden
at the Cancer Hospital, has actually healed ulcerated can-
cers of this organ, in some cases of considerable importance. On
the other hand, when a tumour is present on the side or anterior
part of the tongue, and has only just commenced to ulcerate,
if removed by the knife, possibly the patient may enjoy a com-
plete immunity from the disease. Such a case came under our
notice on the 2nd of August at Guy's Hospital, in the person of
a woman seventy-seven years of age. A tumour of the size of a
small chestnut appeared on the left side of the tongue, rather
upon its anterior surface, had been slowly growing for six or
seven months, and had commenced to ulcerate on its surface,
the ulceration partaking of the usual character of epithelioma.

It was excised by Mr. Hilton with a scalpel, and was not
the tongue as in almost any other part of the body.

RUPIA PRONIMENS.

This form of skin disease is by no means rare, and is com-
monly witnessed in syphilitic wards. We notice an instance
of it in the following case, which there was a peculiarity associated with it
worthy of attention.

A man, twenty-three years of age, was admitted into the
Charing-cross Hospital, with a mural eruption, a gonorrhoea,
and enlarged cervical glands, which he stated to have been
present since Christmas. There was some ulceration of the
penis, which was locally treated (during the warm
weather) by the application of a black wash, which caused
bleeding of the organ; it was therefore changed for another
lotion of sulphate of zinc, after which the bleeding ceased.
This effect is not usually perceived to result from the black
wash, and may have been mainly produced in some way by
the extreme heat then prevalent. He was under Dr. Willshire's
care for the eruption about his arms and back, on which were
conical crusts resembling the shell of a small mussel. These
were disappearing slowly under the use of the syrup of the
lodide of iron.

NECROSIS OF TIBIA AND HUMERUS.

In certain scrofulous constitutions, and occasionally in
syphilis, we meet with more than one bone affected with
necrosis. In a former "Mirror" we noticed an observation, per-
formed by Mr. Stanley, in St. Bartholomew's Hospital, upon
the leg of a sailor, which had been for some time necrosed.
The removal of pieces of dead bone was followed by a com-
plete cure; and the right arm, also diseased, was preserved for
operation at another time. On the 23rd of July, chloroform
was administered to him; several sinuses on the anterior part
of the arm were run into by a large incision; and a small
sequestrum was drawn out of the interior of the enlarged hu-
merus, together with several other pieces of bone. This has
been followed by the best results, for the man may be said to
be now perfectly healed, and will be permitted to renew his
occupation.

CANCER OF THE LEFT TONSIL.

Whilst we have described cases of epithelial cancer affecting
the lips, cheeks, tongue, and gums—in fact, all the essential
parts entering into the formation of the mouth and oral cavity
—we have not before noticed its extension to the fauces, or, more
properly speaking, its idiopathic appearance in the tonsil. Rare
as this position of the disease seems to be, independent of
extension of the more serious unhealthy state of the other
side, we had an opportunity of examining a remarkably distinct example of it, on
the 30th of August, at the Cancer Hospital, in a man forty-
nine years of age, admitted on the 8th, under Dr. Marsden's
care. At the time he was not noticed by the patient until March last,
and shortly afterwards the glands in the neck of the same side
(left) began to enlarge, and are now very prominent. He is
an old smoker and chewer of tobacco, and his appearance is
that of a healthy and robust man. On looking into the throat,
the entire left tonsil appears to have been eaten away by the
ulcerative process of the disease, forming a large excavation,
which is surrounded by the isthmus and left pillar of the fauces,
also ulcerated at their margins by contact with the disease. The
uvula is unaffected.

The patient has been too short a time under treatment to
exhibit any striking change for the better; but the situation is
so extremely inconvenient, and the general contamination of
the system is such that much has been expected beyond mere
palliation. Hereditary predisposition is well made out, for
his sister had a cancer of the breast, under which we un-
derstand she succumbed.

In looking into the records of cancer of the throat, although
we meet with instances in which the tonsils were engaged, it
was mostly so in connexion with disease in other parts of the
body. The present case, therefore, is one of unusual interest
and importance. The disease is clearly epithelial.

MINOR MISCELLANIES.

A Row of Sebaceous Tumours on the Scalp.—An unusual
peculiarity was noticed in connexion with some ten or twelve
sebaceous tumours on the scalp of a woman, aged about forty,
at King's College Hospital, on the 13th of August. They occu-
pied the central line of the head from before backwards, where
the hair is parted; and although they had previously been re-
moved, they had recurred several times, as we understood
Mr. Hale to say. He removed them on this occasion in the
usual way. We think the teeth of the comb which the patient
employs about her hair have a good deal to do with the induc-
tion of these tumours—a cause which is recognised to be pretty
frequent in women.

Eczema Impetiginodes.—In the month of July, we noticed
a little boy, six years of age, in the Charing-cross Hospital,
who had an eruption of vesicles, which had become purulent,
both on the head and over the whole of the back, produced by
eczema impetiginodes. He was admitted in this condition on
the 20th, and in a very short time the back became quite well
by the local application of epsa ceals and the use of mild
lotion astringives; the head also cleared up, the charac-
ter of eczema and impetigo intermixed was at one time
well marked.

Pelucidulad Adipose Tumour.—Mr. Hale excised a fatty
lesion from the upper and inner part of the left thigh of an
elderly woman, under chloroform, on the 13th of August, which
had the peculiarity of being pedunculated: and shaped like a finger,
but which, on removal, was found to be much larger, as well
as extending deeply inward.

Parotid Tumour.—A growth of the size of a small orange,
was removed from the situation of the parotid on the left side
of the neck, by Mr. Stanley, at st. Bartholomew's Hospital, on
the 13th of July. The patient was an elderly man (aged eighty-
two), in whom it had been coming on slowly for two years. It
consisted of a number of loose masses of tissue, which seemed
to be malignant disease. The wound was stuffed with lint,
and allowed to heal up by suppuration.

CALCULOUS AFFECTIONS IN ABERDEEN.—Stone in the
bladder would seem to be a more common affection in Aberdeen
than in any other town in the United Kingdom, if we except
perhaps, Norwich; for a larger number of cases are admitted
into the Royal Infirmary than in any other hospital after that
of Norwich. On the last occasion of making up the tables at
the former institution, the mortality from lithotomy was 1 in 9.
On the last occasion of making up the tables at the Royal
Infirmary, 2 deaths occurred in 112 cases operated upon; and
they were from chronic cystitis associated with kidney disease.

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