tomy in the male, but the ages cannot be accurately ascertained; of these 8 died, or 1 in every 10½ operations.

From Jan. 1st, 1870, till Jan. 1st, 1880, the records of the two hospitals of Glasgow contain 95 cases of lithotomy in the male; of these 15 died—a mortality of 1 in every 6½ operations. Of these, 33 were under fifteen years of age, with 2 deaths; while 62 were over fifteen years of age, with 13 deaths.

The total number of lithotomies in the male, without reference to age, in hospital practice in Glasgow, is 338, with 46 deaths, or 1 death in 7½ operations.

Lithotrity.—The total number of cases of lithotrity in the male performed in the hospitals is so small, and the particulars up to 1875 have been so carelessly recorded, that it is unnecessary to give the meagre information which the records afford.

CASES OF NEURALGIA TREATED WITH TONGA.

By W. J. H. LUSH, M.D., F.R.C.P.ED., M.R.C.S.E., &c.

CASE 1.—W. H.—, aged thirty-one, had been suffering from most severe neuralgia in the right superior maxillary division of the fifth pair of nerves for nearly ten days, the neuralgic pains darting over the lower eyelid, the cheek, the upper lip, and side of the nose, the paroxysms, lasting from ten minutes to half an hour, occurring six or eight times in the twenty-four hours. The teeth in both the upper and lower jaw were in a very decayed condition. One teaspoonful of the alcoholic extract of tonga (prepared by Messrs. Allen and Hanburys, 37, Lombard-street, E.C.) was ordered to be taken in half a wineglass of water every six hours till the pain was relieved. The paroxysms entirely ceased after the fourth dose.

CASE 2.—Mary B.—, aged fifty-four, suffering from severe sciatica, was ordered a wineglass of the infusion of tonga (from the bag) every six hours. After taking the infusion for four days it was discontinued, as no benefit was derived.

CASE 3.—A woman, aged twenty-nine, in a very weak, anæmic state, with inflamed axillary glands, had suffered from supra-orbital neuralgia for six or seven days. Was ordered a wineglass of the infusion (from the bag) every six hours. The pains lessened in severity after the eighth dose. She was then placed on a liberal diet, and a tonic of the iodide of iron ordered. The pains, however, returning in great severity, she was ordered one teaspoonful of the alcoholic extract three times a day. The paroxysms ceased and did not return after the fifth dose had been taken.

CASE 4.—A young woman, aged nineteen, had severe neuralgia of the right inferior dental nerve. Her teeth were very much decayed, and several stumps were extracted. She was ordered a wineglass of the infusion (from the bag) every six hours. The pain still continued after taking it for three days, although in a less severe degree. I did not see her again after the third day.

CASE 5.—Wm. P.—, aged thirty-two, had suffered greatly from neuralgia for nearly two years. He considered the original cause of the attacks to be a blow received about that time. The paroxysms, which occurred periodically about every month or six weeks, varied in severity and duration, and were for the most part confined to the inferior dental nerve on the left side, although occasionally the right was also the seat of pain. The patient had been under my notice for nearly a year and a half, and during that time attacks incapacitating him from following his occupation were of frequent occurrence. Sulphate of quinine alone, and in combination with bromide of potash and chloral hydrate, as a rule, relieved the patient in three or four days. He was ordered one teaspoonful of the alcoholic extract in water three times a day. The pain very much decreased after the fourth dose, and entirely ceased after the sixth dose of the extract had been taken. In my case-book I find the following note on April 15th on this case:—"Had another bad attack, though less severe than the last. The neuralgic pain entirely disappeared after the third dose." This patient complained of dryness of the mouth and fauces after each dose of the extract had been taken, the dryness continuing for nearly an hour, and the return of saliva being characterised by a "pricking" sensation along the gums.

These five cases have been taken as they came under notice in the ordinary course of my practice, and, being few in number, may not be considered of much value as a proof of the efficacy of tonga as a remedy for neuralgia; but, as with every new remedial agent, it is only by the unbiased report of a large number of unselected cases that a correct estimate of the value of tonga in the treatment of neuralgia and allied nervous affections can be obtained. As in the cases reported in THE LANCET, March 6th, by Drs. Ringer and Murrell, no toxic symptoms were produced by the administration of the drug in any of these cases except the fifth, in which case each dose was undoubtedly followed by a decrease in the amount of saliva.

Fyfield, Hants.

SEVERE INJURY TO FOOT; ANTISEPTIC TREATMENT; RAPID HEALING.

By ANDREW LANG BROWNE, M.D.,
SURGEON, ARMY MEDICAL DEPARTMENT.

SAPPER M—, Royal Engineers, aged twenty-seven years, a strong, healthy man, was brought to the Cambridge Hospital, Aldershot, on the afternoon of the 23rd March last, suffering from a severe injury of the left foot. On admission he stated that, while engaged in removing a stove from one of the huts in camp, a piece of the iron piping which formed its chimney dropped from the roof on to his foot. On examination it was found that the edge of the pipe had cut right through his strong ammunition boot and sock deeply into the foot, almost dividing the outer side of the foot, together with the four smaller toes, from the rest of the limb. The wound was more or less curved, and extended across the foot from about the middle of its outer side to the metatarso-phalangeal joint of the second toe. I passed my finger into it, and found the metatarsal bones of the fifth, fourth, and third toes smashed through, the head of the second metatarsal bone crushed and splintered, and also dislocated from its phalanx.

Treatment—The wound was simply washed out thoroughly with carbolic lotion (one to forty), the bones placed in position, and the edges of the wound drawn together by four silver sutures. A piece of lint moistened with carbolic lotion was then laid over it, and the foot and ankle completely enveloped in a piece of gutta-percha tissue, and the limb placed on a splint. I dressed the wound morning and evening with carbolic lotion and lint. On the fifteenth day after admission the sutures were removed, and by the twenty-first day the wound had quite healed, and the patient was allowed up.

Remarks—This case is remarkable, not only as regards the rapidity with which the wound healed (twenty-one days), and the complete union which took place after so severe an injury of bone and tissue, but also on account of the entire absence of pus, the dressings at no time being soiled by any.

Cambridge Hospital, Aldershot.

A Mirror

OF

HOSPITAL PRACTICE, BRITISH AND FOREIGN.

Nulla autem est alia pro certo noscendi via, nisi quamplurimas et morborum et dissectionum historias, tum aliorum, tum proprias collectas habere, et inter se comparare.—MORGAGNI *De Sed. et Caus. Morb.*, lib. iv. Proœmium.

KING'S COLLEGE HOSPITAL.

OPERATION FOR UNUNITED FRACTURE OF THE OLECRANON
BY OPENING THE JOINT, AND WIRING THE FRAGMENT TO THE ULNA; BONY UNION.

(Under the care of Mr. WILLIAM ROSE.)

FOR the following notes we are indebted to Mr. John Phillips, house-surgeon.

W. M—, aged twenty, was admitted into the Fisk ward on March 31st. Early in January he fell down on to his left elbow. Great swelling followed, and he was treated