

gastric artery, of a calibre not exceeding the size of a common pin, which ran in a slanting course inwards and across the linea alba for the epigastric trunk. There was no internal hemorrhage. The walls of the abdomen were between two and three inches thick, and the impediment to the removal of the fluid had been occasioned by the falling into the canula of a *tail*, as it were, of the border of the omentum.

63. *Extensive Laceration of the Organs of Generation.*—The following case, recorded by Mr. SNELL in the *London Med. Gaz.*, (Oct. 1846,) affords a remarkable example of the restorative powers of nature, and is well calculated to show how much may be accomplished by those powers when judiciously assisted by art.

"A boy, twelve years of age, was climbing up a rope to the end of which a hook was attached: by some mischance his hands gave way, and he fell backwards 'head over heels.' In his descent, the point of the hook caught his trousers, penetrating the integuments just above the pubes, and tearing back the whole of the genital organs close to the anus.

"When first I saw the laceration (some hours after), the injured parts presented a very novel appearance. The sufferer was in bed, and, on my separating the legs, nothing appeared of the genitals but what resembled a lump of fat or an undistended bladder lying close to the anus. The testicles were hanging by the spermatic cords on each side, and I was informed that but trifling hemorrhage had ensued. Upon examining this mass of apparent fat, I made out the penis, scrotum, &c., but all corrugated and shriveled up, cold and bloodless. These I stretched out into shape, and found that, by a little careful and nice adaptation, they could be made exactly to fit the torn surface above. Having next returned the testes, and accurately adjusted the parts with numerous stitches, the whole was retained in proper position. These were supported in every needful direction by strips of isinglass plaster spread upon ox-gut. The whole was then covered with carded wool, until warmth and vitality were perceptibly returning to the detached portion.

"I confess that I entertained considerable doubt as to the probability of adhesion, and felt not a little anxious, during the three succeeding days, lest sloughing should ensue.

"The isinglass plaster, from its transparency, allowed me to see distinctly how the case was progressing without disturbance of the parts: and I was much gratified, on the day following, to perceive that not only had vital warmth been restored, but also that they were agglutinating most satisfactorily.

"Finding, on the third day, that the isinglass plaster yielded sufficient support to ensure local apposition, I cut the stitches least required, and continued to do so daily.

"The parts gradually healed, and, with the exception of one or two spots which were a little puckered, and in which granulations appeared, the whole of this extensive laceration healed by the first intention; and I need scarcely add, under circumstances which little warranted the hope of such a termination."

64. *Spontaneous cure of Hydrocele.* By FRED. COX, Esq.—Mr. — consulted me in the autumn of last year, for an inflamed testicle, which was treated in the usual way by leeches, cold lotions, &c., and soon got better, a slight enlargement remaining. After a few weeks fluid became perceptible in the tunica vaginalis, and this went on increasing until a tolerably large hydrocele was produced. Early in February last, I removed the fluid by means of the trocar, but took no steps to effect a permanent cure. The fluid, as was to be expected, soon began again to accumulate, and in the month of April at least five or six ounces were in the sac. I saw Mr. — in the months of May and June, and each time found the water had sensibly decreased, and by the middle of July it was entirely gone; the most minute examination failed in detecting the least appearance of fluid, nor has any been effused up to this time. Beyond a slight enlargement of the testis, and a little tenderness and occasional pain of that organ, the parts are now perfectly normal.

The occupation of my patient is of a most active character, requiring his presence in London twice a week, and subjecting him to much horse-exercise every day. He is rather intemperate in his habits. I mention these circumstances be-