

"As the point of the foot was still drawn considerably inwards by the contraction of the tendon of the flexor longus pollicis, this was divided, and extension afterwards kept up.

"In about ten weeks after the date of the first operation, the form and mobility of the foot left nothing to wish for; and the boy could move about with the greatest facility.

"The fourth case occurred in a youth 19 years of age. The foot was turned inward, so that the point of support in standing was on the metatarsal bone of the small toe. The result of the operation and of the subsequent treatment was so successful, that the deformity was quite removed (*das entstellende eubel war ganz gehoben.*")

53. *Section of the Sterno Mastoid-Muscle, for the cure of Wry-Neck.*—This operation has been performed by M. AMUSSAT. The patient, a man 53 years of age, stated that seven years ago, while carrying a heavy weight on his back, he suddenly felt a sharp pain on one side of the neck, and that this pain lasted for the following fortnight or three weeks; that some time after all uneasiness had ceased, he began to experience, chiefly at night, a stiffness of the neck, and a tendency to incline it to the left side; that on awaking one morning, he found that he had a very painful wry-neck; that this attack however speedily abated; but that ever afterwards the stiffness of the neck and its turning to the left side were much more troublesome than they had been before, and that these symptoms soon increased so much, that he was forced to resort to the expedient of steadying his head, when engaged at his work, by fixing a packthread to his front teeth, and securing it to one of his thighs! This expedient, however, proved insufficient; and in the course of ten months, the malady had increased so much that he was forced to discontinue altogether his employment as a shoemaker. The left sterno-mastoid had become larger and thicker than its fellow. A variety of remedies, including blisters, acupuncture, electricity, &c., had been tried without avail. M. Amussat therefore advised him to submit to the division of the affected muscle. Pinching up the skin, about an inch above the insertion of the muscle into the extremity of the clavicle, he divided the fold with a sweep of the bistoury; he then severed the muscle, layer of fibre after layer, permitting one to retract before dividing the other, until the entire substance was fairly cut through, with the exception of a few of the outer, or clavicular fibres. A few arteries sprung; but the hemorrhage from these was easily arrested, by twisting their bleeding extremities. The wound was then dressed with simple cerate. The wryness of the neck was unexpectedly quite as great after, as it had been before, the operation, and continued to be so for at least three weeks. As the cicatrization of the wound advanced, the deformity was observed to decrease; and, by the end of the sixth week after the operation, when the wound was quite healed, the normal position of the neck was perfectly recovered.

The most interesting features of the present case are, first, the long continuance of the malady; it had existed for seven years; secondly, the cure obtained without the use of any apparatus, either during or after the section of the muscle; thirdly, the permanence of the cure—it is now upwards of a twelvemonth since the date of the operation; and lastly, the proof which is thus established of the efficacy of the treatment recommended by the older surgeons, and which of late years had fallen into unmerited desuetude.

The point at which M. Amussat divided the muscle, was that usually indicated in surgical works. M. Malgaigne has, in his *Manual Opérateur*, suggested that the division should be made higher up, with the view of more effectually avoiding the large blood-vessels in the neighbourhood, and also because the muscle is less bulky. With respect to the former of these motives, it is founded on an anatomical mistake; for M. Amussat shews that the sterno-mastoid is as close to the blood-vessels higher up in the neck, as it is lower down; and moreover, that at this latter point, the omo-hyoideus being interposed between the muscle and the vessels, secures the latter in some degree from the risk of injury. —*Med. and Chirurg. Rev. from Gazette Médicale de Paris.*

54. *Radical cure of Varicose Veins and of Hernia by Acupuncture.*—M. BONNET, Surgeon in Chief of the Hôtel Dieu at Lyons, has treated eleven cases of