

its feeling, but the little finger may be pinched without the patient's being at all conscious of it. The patient's health is perfectly good.

"This is the third operation of the kind M. Roux has performed, and they have all succeeded. One of the former patients died afterwards of phthisis; the other is still alive. No callus is formed at the extremities of the bones, they seem to be replaced by flexible fibro-cellular tissue: the forearm is moveable; it cannot be, indeed, bent or straightened at pleasure, but the patient gives it these motions with the assistance of the other hand. This man is a grinder by trade, and finds the limb very useful."—*London Medical and Physical Journal*, April, 1828.

89. *Breaking down Calculi in the Bladder.*—M. AMTSSAT has laid before the Academie Royale some observations upon those cases in which it may be prudent to attempt to break down the calculus in the bladder, and those in which the operation for lithotomy must be had recourse to. If the patient is not nine years of age, the operation will be necessary, as the urethra will not, before that period of life, admit the necessary instruments for breaking down the stone. If the stone is of a large size—if the bladder, the prostate gland, or the kidneys, are diseased, or if any of the vital organs are diseased, and if the patient has for a long time been afflicted with stone in the bladder, the operation of lithotomy will be necessary. The surgeon should only have recourse to breaking down the stone in the bladder when the patient is in good health, and is not seriously affected by the symptoms produced by the presence of the urinary calculus. M. Lisfranc, however, mentioned the case of a child, of seven years of age, in which the stone had been broken down with success by M. Civiale. The same operation had also been performed upon a patient, notwithstanding he laboured under disease of the prostate gland.—*Archives Gen. Jan. 1828.*

90. *Medullary Sarcoma of the Testicle.*—Mr. EARLE relates, in the *London Medical Gazette*, Vol. I. No. 10, two cases of this disease, in both of which he extirpated the testicle, and there is reason to hope that the cure is complete.

MIDWIFERY.

91. *Case of Indurated Enlargement of the Uterus, successfully treated with Iodine.* By R. A. TUFFORD, M. D.—J. R. æt. forty, costive habit, accustomed to use purgatives constantly and in large doses, had not had any evacuation from the intestines for seventeen days, though large doses of purgative medicines had been taken—for the last three days her stomach rejected every thing except a little porter—head-ache—total want of sleep—pulse 108 and very feeble—abdomen enlarged and tender on pressure, particularly in the epigastric and hypogastric regions—urine passed with pain and mostly by drops. Had borne one child when about sixteen years old. The bowels were relieved by enemata, followed up by oil, &c. and her general health and strength improved, but the tenderness and pain in the hypogastric region continued, also the pain in passing urine, which still came away in small quantities at a time. The pubic bones were very sensitive to the touch, and a tumour was felt above the symphysis. The patient acknowledged that there was a hard tumour in the vagina, which was very painful, and had gradually increased in size without any discharge from it. Menstruation had ceased for some months. On introducing a finger into the vagina, a projecting substance was felt, which was easily ascertained to be the os uteri, somewhat enlarged, and firmer than natural; beyond and connected with which, a large tumour of osseous hardness opposed resistance. The tumour was the uterus of great size, and in a state of induration. Dr. T. ordered alternative doses of corrosive sublimate, with pills of conium and hyosciamus, with strict attention to the bowels. This treatment was persevered in for thirty-

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