

enlarged, and occupied a prominent position in the neck, extending downwards as far as the chest. It appeared to invade the entire bone, but was really confined to the right side. Its increase had been rapid since birth, and as it was still enlarging, it became necessary to do something to afford a chance for life, as, if left alone, suffocation would have ensued in a short time. Accordingly, chloroform being given, an incision was made by Mr. Coote upon its outer part, and a thin shell of the expanded jaw-bone reached. This was opened, and the interior was found to be filled with a regular nest of cysts, one placed within the other, all of which were removed, and the cavity closed with lint. Very little blood was lost during the operation, and for a few days afterwards the child improved very much in health, although necessarily weak, and the great swelling of the neck was much diminished. Suppuration became freely established, and the drain shortly after began to tell upon the system, for the child became weaker and weaker, although well supplied with wine and good nourishment, and finally died from exhaustion.

Had a much earlier operation been resorted to, it is but reasonable to infer that a more fortunate issue might have resulted. We place the case upon record, inasmuch as, however common fissure and other deformities in the upper jaw may be, they are seldom seen in the lower.

A KICK IN THE EPIGASTRIUM PRODUCING PLEURISY WITH EFFUSION AND DISPLACEMENT OF THE HEART.

(Under the care of Dr. FARRE.)

Ellen A.—, nine years of age, was brought into St. Bartholomew's Hospital on the 25th ultimo, suffering from the effects of a kick in the epigastrium. The part was tender, but nothing beyond this symptom was observed at the time; she was therefore kept quiet in bed for a few days. A slight cough then came on, and upon examination the child was found to be suffering from pleuritic effusion into the left side of the chest, which was universally dull. The heart's pulsation was most distinct on the right side of the sternum. The intercostal spaces of the left side were prominent.

She was put upon small doses of blue-pill and squills thrice a day, with a mixture containing the acetate of potass. Under this treatment she passed a good deal of urine, and by the 14th instant the intercostal spaces were less prominent; but there was little alteration in other respects. On the 21st the cough was much less and the effusion not so great; yet the heart still beat to the right of the sternum, and she continued to pass much urine. As the gums were not tender from the medicine, it was continued. There was no urgent dyspnoea, and she was to some extent improving.

We relate these brief details for the purpose of showing that a kick in the epigastrium of a child, which probably struck the lower part of the chest, was followed by an attack of pleuritis unassociated with any severely acute symptoms, such as pain, dyspnoea, fever, &c. The child was delicate and small for her age. There was no history of illness previous to the receipt of the injury.

ST. MARY'S HOSPITAL.

EXTENSIVE RUPTURE OF THE LIVER FROM A KICK BY A HORSE; DEATH IN HALF AN HOUR.

(Under the care of Mr. SPENCER SMITH.)

ON the 12th of August, a man, aged thirty years, was assisting in the detachment of a strap fastened to the shaft of a Hansom cab, drawn by a very restive horse, when the animal reared one of his hind legs, and kicked the man in the belly. He became very faint, and was taken to a surgeon close by, who recommended his instant removal to the hospital. On arriving there, he was helped out of the cab, was conveyed to the accident ward, and assisted to undress himself. He was placed in bed, and in the course of three or four minutes he was dead. This was half an hour after the receipt of the kick. When brought in, internal hæmorrhage was suspected from the blanched appearance presented by the patient and the state of the pulse.

For the above history we are indebted to Mr. E. Chisholm, who performed the autopsy on the 14th. Two of the right lower ribs were broken, and on opening the abdomen a quantity of blood was found poured out, which had infiltrated most of the tissues, especially the areolar behind the kidneys and liver. The liver was almost completely torn across, the right

lobe being nearly separated from the left. This had given rise to the fatal hæmorrhage. There was scarcely any discoloration externally to indicate the spot where the kick was inflicted.

ST. GEORGE'S HOSPITAL.

THE ÉCRASEUR EMPLOYED TO REMOVE THE MALE ORGAN AFFECTED WITH CARCINOMA.

(Under the care of Mr. HENRY LEE.)

WITHIN the last twelve months the student has had frequent opportunities of witnessing the operation for removal of the male organ affected with some one of the forms of carcinoma. Indeed, so numerous have been the cases that it has been remarked, that penile cancer was raging as an epidemic. In all the various instances, whether the disease was confined to the prepuce, the glans, or the body of the organ, the mode pursued to get rid of it was ablation by the knife, the operation being modified according to the views of the different operators. In some patients, the disease had been previously removed, but had returned after the lapse of some months. The duration of the disease varied considerably, dating from five or six months to as many years back. In the middle of July last, Mr. Henry Lee performed removal with the knife in a man who had had cancer for nearly seven years. It formed an outgrowth from the penis in the shape of a wart. On that occasion the bleeding was very great, as is generally the case; and Mr. Lee determined on the next occasion to employ the écraseur to obviate this. The opportunity was afforded him on the 15th of August. An elderly man was given chloroform, who had been subject to the scirrhus variety of the disease for eight years, affecting the whole of the glans. It was remarkably indurated and resisting. The skin was drawn forward and cut through by a sweep of the knife round the organ, excepting the superior part, which contained the dorsalis penis artery. The écraseur was now applied, and, after the lapse of a few minutes, the amputation was effected, and the stump did not bleed. A few of the vessels were, however, tied as a precautionary measure against future hæmorrhage. The stump assumed a semicircular form, its surface was quite smooth, and altogether the operation was satisfactory. This was one of the first occasions of the employment of the écraseur in the London hospitals for removal of the male organ, and the result in this instance fully shows its value in cases where hæmorrhage is likely to be dangerous.

The patient is doing very well.

Medical Societies.

EPIDEMIOLOGICAL SOCIETY.

DR. BARINGTON, PRESIDENT, IN THE CHAIR.

A PAPER by Dr. DUNCAN, of Liverpool, on

THE RECENT INTRODUCTION OF FEVER INTO LIVERPOOL BY THE CREW OF THE EGYPTIAN FRIGATE "SCHEAH GEHALD,"

was read by Dr. M'WILLIAM. The *Scheah Gehald* left Alexandria in November, 1860, and arrived at Liverpool on the 16th of February, 1861. The crew, in number 476, consisted chiefly of Arabs; the captain was the only European on board. The voyage was very tedious, and the weather was cold and gloomy. The men, who were unaccustomed to the cold of a northern climate, crowded below for warmth and shelter. Many suffered from sea-sickness, and the discharges from the stomach and bowels were allowed to accumulate in all parts of the ship, which was so disgustingly filthy that on her arrival she had to be sunk in the graving dock. The space allotted to the crew was quite insufficient even under ordinary circumstances, and no attempt at ventilation was made, while the persons and clothes of the crew were filthy in the extreme, and swarming with vermin. During the entire voyage their clothes were not washed or changed. The captain had been instructed to procure fresh clothing for the crew at Malta, but in his anxiety to make a quick passage he had neglected to do so. The pilot who went on board stated that when any of the crew passed him on deck he perceived an "awful smell." In addition to the