

Mr. H., by dint of great exertion and bodily suffering, arrived at length at the home of his brother in the interior of Illinois, there, as he supposed, shortly to end his days.

Soon after his arrival, and during one of the violent fits of coughing, to which he was subject, a foreign substance, which proved to be a fish bone, cuboidal in shape, and a half inch or more in diameter, was suddenly and forcibly ejected from the laryngeal opening upon the floor.

From this time forward, all the alarming symptoms began rapidly to abate, and at this time, two years since, the individual above named is in perfect health.

After the above fortunate termination of his disease, Mr. H. recollected that a month or two previous to the appearance of the above-named symptoms, while dining upon fish, he inhaled, as he supposed, a small portion into the air-passages, but, as it gave him but little trouble at the time, he thought no more of it, and did not, during his illness, suspect, even, the true cause of his sufferings.

III.—A friend of mine, a physician, has given me the history of the case of an individual who fell, accidentally, upon the extremity of a blunt stick; which, piercing the clothing and integuments, passed into the cellular substance surrounding the lower part of the rectum. The opening thus produced assumed the character of a fistula, and remained open for a long time after the accident. The operation of laying open this cavity, was at length performed, which resulted in the discovery of a piece of cloth imbedded in the tissue at the bottom of the ulcerating canal.—*Illinois and Indiana Medical and Surgical Journal*.

CASE OF STRANGULATED INGUINAL HERNIA.

By Paul F. Eve, M.D., Professor of Surgery in the Medical College of Georgia.

On the 17th of last August, I was requested by Drs. Hanson and Jones, of an adjoining county, to see, with them, a patient laboring under strangulated hernia. Mr. G. S—— is about 44 years, weighs 185 pounds, and is only five feet six inches high; his habits are very good. In 1841, four years ago, while lifting a cotton bale, "he felt something give way in the region of the right groin." On Thursday, the 14th of August, when sowing turnips, he suddenly experienced pain low down in the right side of his abdomen. He took, soon after this, a dose of salts, which acted freely upon his bowels; but as no relief was thus obtained, Dr. Hanson was sent for, and reached him early on Saturday morning the 16th. Mr. S. was now freely bled, and means employed to reduce a hernia found existing in the right inguinal region. Reduction not being effected, Dr. Jones was sent for, and arrived the evening of the same day. All ordinary means failing to restore the protruding viscus, including tobacco injection which evacuated the bowels freely, I was sent for at 2, A. M., of the 17th, and saw the patient a few hours afterwards. At half past 8

o'clock, having exhausted taxis, &c., as my two professional friends had already done, the operation was decided upon.

The tumor extended from the external abdominal ring to the bottom of the scrotum on the right side. It was much distended, and the patient complained of great pain at this region. In making the incisions, the *arteria ad cutem abdominis* was found to require the ligature, and when the sac was opened, a saucer was employed to catch the bloody serum which flowed out. Of this there was more than a half pint, which, together with a portion of the omentum, about the size of a man's fist, formed the hernial tumor. There were no adhesions to the sac. The internal abdominal ring was now divided by carrying the edge of Sir Astley Cooper's knife directly upwards, and efforts made to return the protruding portion of omentum. From the induration of the part presented at the internal ring, success did not attend this attempt at reduction. The knife had again to be resorted to, and the ring greatly enlarged by free incisions, and then the omentum only returned by prolonged and forcible manipulations.

After the operation, we concurred in the opinion that our patient, in all probability, would not long survive it. Forty drops of laudanum were prescribed, also absolute diet and quietude. Upon opiates, however, was placed the greatest reliance; and Dr. H., the family physician, kindly consented to remain twenty-four hours with Mr. S.

On the 19th, two days after the operation, I was much gratified to receive a very favorable report from our patient. His sufferings had gradually diminished, his pulse was at 88, and his wound, which was now dressed, found to be doing well. We even placed him on another mattress, while his bed was made up, and his linen changed. He had yet had no evacuation from the bowels, but had passed some flatus. An emollient enema was prescribed, should he be troubled in the bowels during the day, which if not moved on the morrow, were then to be stimulated to action by an injection.

The 1st September I heard Mr. S. was improving, and on the 6th of October, he went eleven miles to vote at our State election. The ligature to the small artery was not removed until the 16th of this month, and during November last I met him in our streets attending to his business.

The soft pad of a truss, with rather a weak spring, was recommended to be worn, in this case, for a few months.—*Southern Med. Journal.*

NEW METHOD OF PRESERVING ORGANIC MATTERS.

At a late soirée, held by the Marquis of Northampton, Dr. Sylvestri, Physician to the Royal Hospital at Naples, and chief Physician of his Majesty's guard of honor, exhibited several preparations made according to a method discovered by him. By this process, organic matters are perfectly preserved, being converted into a substance possessing the hardness of stone, and admitting of being polished. Among the preparations shown, were a portion of human liver, a section of a kidney, a section