

tumor of the liver. In both these cases the remedy had been given with good results. Both had been previously tapped, and purgatives and diuretics alike failed to give relief. Finding that the fluid was steadily reaccumulating, the patient had recourse to onions. Under their use the amount of urine passed rose in a few days from ten ounces (three liters) to a hundred ounces (thirty-three liters).

SURGICAL OPERATIONS IN THE MAINE GENERAL HOSPITAL.

[REPORTED BY E. E. HOLT, M. D.]

Hæmorrhoids.—J. E. K., aged sixty-eight, a railroad employé, was admitted August 28, 1875, with the ordinary history of piles; he had a pendulous mass, of the size of a man's fist, around the margin of the anus, which had begun to degenerate. He was unable to pass his urine, which was smoky and was made turbid by heat and nitric acid. Dr. Gerrish thought that there was more albumen present than could be accounted for in the blood, which probably came from the kidneys, bladder, and urethra; he also found pus and epithelium, the latter being renal. It was decided that operative measures would best relieve the hæmorrhoids and the irritation along the urinary organs.

September 1st. The bowels having been moved freely and the patient put under ether, Dr. Weeks dilated the sphincters and ligated the piles.

September 8th. The tied masses sloughed off. The urine was clearer. The bowels, which had been kept constipated by opium, were freely moved by warm-water injections and castor-oil.

September 25th. A defecation was accompanied by severe hæmorrhage, which was checked only by repeated enemata of dilute solution of sub-sulphate of iron. The faecal discharges were now involuntary, and excessive purging occurred occasionally. The patient was able to pass a little urine twice, which is now free from blood and albumen. He took opium, nux vomica, quinine, and tincture of iron three times daily.

October 2d. The patient has gradually obtained perfect control of the bowels, and passes his urine freely. Discharged, well.

Cheiloplasty.—W. S. B., aged forty, was admitted August 23, 1875, with cancer of the lower lip, the disease having commenced six years ago. He has had it burnt out several times by "cancer doctors," so that now the four incisors are in view, and what is left of the lip is thickened and indurated. His father and two uncles were treated for cancers about the face.

August 27th. Sulphate of quinine (one grain) with tincture of the chloride of iron (fifteen drops) has been given three times daily and the bowels have been freely moved. The patient was etherized and Dr. Weeks, assisted by Professor Greene, who suggested this mode of operation, made an incision from each corner of the mouth down the whole length of the chin, including every part of the cancer and indurated tissue in a V-shaped space. This was removed and two horizontal incisions were made through the entire thickness

of the cheek, outward from either corner of the mouth, for an inch. The flaps thus formed were dissected up from the jaw as far as the angle, so that they could easily be brought together in the median line; they were held in position by silver and silk sutures. The mucous membrane and skin of the lip thus apposed were stitched together by fine silk sutures. Two triangular pieces, the bases of which corresponded with the horizontal incisions made from the corners of the mouth, were removed from the cheeks above; the edges were brought together and held by silver and silk sutures, and the whole was dressed in dry cotton.

September 2d. No pain. The patient is very comfortable, and has taken beef-tea, milk, and egg-nog, readily, through a tube. The wound healed entirely by the first intention. The first suture was removed on the third day and all the rest before the fifth day.

September 14th. On the 3d, a severe erysipelatous inflammation began in the left cheek and thence spread upwards over the face and head, accompanied by high fever. This attack was subdued by appropriate treatment, principally by large and repeated doses of tincture of the chloride of iron, and the patient was discharged with a lip so perfect that at a short distance it appeared entirely natural.

It is believed that this mode of operation, originally proposed by Professor Greene in this class of cases, is far superior to any other, as there are no surfaces to heal by granulation, mucous membrane is supplied in its normal place, there is no tension of the parts, and the patient soon regains movement of the lip, with very little deformity.

Perineorrhaphy.—Mrs. J. H. A., aged fifty, was admitted September 20th, with complete rupture of the perinaeum; she had only slight control of the bowels, and was subject to profuse metrorrhagia, in which the tampon had to be used to save her life. Her disability was caused by a prolonged labor thirteen years ago, in which instruments were used. She has had two children since that time, with precipitated labors.

September 21st. The bowels having been thoroughly moved by castor-oil, and ether having been administered, Dr. Weeks proceeded first to restore the sphincter muscle, by denuding the edges and bringing them together by silver sutures according to Sims's method, so thoroughly demonstrated and illustrated with practical results by Dr. Emmett. The second part of the operation consisted in vivifying the two lateral surfaces of the ruptured perinaeum, and bringing them together by silver and silk sutures. The urine was drawn, the wound dressed with dry cotton, and the patient put to bed, morphia being administered hypodermically to quiet and relieve pain. The diet consisted of milk, beef-tea, and toast.

October 6th. Union of the wound by first intention was obtained; there was no suppuration except along the line of the sutures, the first of which was removed on the fourth day and all the rest before the sixth day after the operation. The bowels were kept constipated by opium till the fifteenth day, when they were freely moved by warm-water injections and castor-oil. The patient had perfect control of the sphincter muscles.

October 16th. Discharged, entirely well.