

One important and interesting lesson may be learned from this case, *viz.*, that an abscess or cyst of the right lobe can be evacuated without injuring the gall-bladder, or the congeries of large vessels and ducts, &c., in the transverse fissure. Of course, the existence of multiple abscesses as in this case, must exclude all hope of a favourable issue, and if it were possible to diagnose them, non-interference, for own credit, would be the best plan.

We both, however, strongly recommend the early recourse to Dieulafoy's instrument as soon as certain symptoms, no matter how insidious or obscure at first, become decided.

EARLY DENTITION.

By F. CULLEN, M.D.

5th June 1876.—A well-formed female child, said to be only two months' old, has suffered for some days with fever and has already cut the two lower incisors. On examination I found the mouth hot and dry, tongue furred, upper gums tense and swollen, fever continuous, remitting about 2 o'clock each morning until 8 or 10 A.M. I gave a laxative of P. Rhei Co. cum. Hyd. c. Creta and some diaphoretic mixture, and on the morning of the 8th slightly lanced the upper gums, which seemed to give slight relief as the fever was delayed until noon. On the 9th one of the upper incisors could be felt, but at midday convulsions occurred, and continued with short intervals until 11 A.M. of the 10th, when the child died, having cut three teeth, being only two and half months' old.

CASE OF FUNGUS FOOT.

By SUBHAN ALLY, *Assistant-Surgeon, Hissar.*

As several cases of the disease called *Chionyphe Carteri*, or Fungus Foot, have occurred under my observation and treatment in the Government Charitable Dispensary, Hissar, I subjoin the notes of a case, which, I hope, will be interesting:—

Mota, aged 45, cultivator of Faidalpore, in the Sekur Principality, was admitted into the Hissar Charitable Dispensary on the 10th of June 1876, with enormous enlargement of the left foot caused by the presence of the Fungus called *Chionyphe Carteri*. The foot from the toes to about 2 inches above the ankle was immensely swollen; there were 7 or 8 ulcers visible on different parts of it from which ichorus matter mixed with granules was issuing, and which was very offensive. The glands of the groin in the course of the femoral vein were much enlarged, forming an oblong mass about 4 inches long by 2 inches broad. The pain was severe at night, extending from the toes to the bubo. The patient was emaciated and weak; digestion impaired; took very little food, and was desponding. The muscles of the leg above the swollen part were atrophied.

History.—He states that about 10 years ago he felt a slight itching in the sole of his left foot, similar to the pricking of the part by a *kunker* or stone. This itching continued for 7 years in spite of various native liniments, which he applied without intermission, and at the end of which time a tumour formed below the ankle on its outer side. The foot had been enlarging slowly during all this period. Subsequently an abscess formed and burst, discharging thin matter mixed with white granules. During the formation of the abscess the pain had been lancinating and excruciating, but it subsided when it burst. Several other similar tumours in other situations, one after another, followed the first with similar results. The openings gradually contracted, but each led to a sinus from which ichor, mixed with white granules, exuded. The matter was very offensive, particularly during the rainy season when maggots were present in it.

Treatment.—Amputation of the leg above the diseased parts was performed, the patient put under the influence of chloroform, and the foot removed by Fergusson's method. On cutting open the severed foot after the operation, bunches of white and blackish granules, like poppy seeds, were seen imbedded in the midst of a fibrous sarcoma which surrounded them. These granules had penetrated all the vessels, nerves and bones of the foot, together with the lower ends of the tibia and fibula. The bones were so soft as to be easily cut by the knife. Strong carbolic acid was applied to the cut surfaces of the stump, and the flaps were adjusted and sutured; cold water dressing was applied and continued for two days, after which the part was dressed with carbolic oil and lint. The wound united by first intention; sutures were removed on the 10th day; tonics ad-

ministered, and the patient at the end of 20 days was quite well. His digestion improved steadily, and the swelling of the glands in the groin disappeared.

HISSAR, 7th July 1876.

CASE OF GANGRENE OF LEFT-ARM AND FORE-ARM, FOLLOWING FRACTURE OF HUMERUS AND TIGHT BANDAGING. AMPUTATION.

RECOVERY.

By ANDREW BERNARD MORRIS, L.K.Q.C.P.I., L.R.C.S.I., L.M.,
Civil Medical Officer, Kurseong, Bengal.

NUZREE, aged 11 years, native of Nepaul, fell from his pony on the 15th May 1876, and fractured his left humerus at about the middle. He was taken to his house, and the injured limb was tightly bound up in bamboo splints by one of his relations. The splints were kept on for about a week, by which time gangrene had set in to an advanced state. My attention was called to the patient by the native doctor of the Government dispensary. I at once visited the boy at his house, and endeavoured to persuade his friends to send him to the hospital, in order that the limb might be removed; however, he did not come to hospital till 24 days after the accident had occurred. On admission, he was suffering from fever of a low type, extreme emaciation, countenance anxious. The fractured limb was in a state of gangrene from the fingers to within about five inches of the shoulder, and the shoulder itself was œdematous. The boy was placed under chloroform, and the arm removed by the side flap method just above the line of gangrene, but through the œdematous tissues. The operation having been completed, carbolic acid lotion—1 in 20—was applied to the stump on lint. Ordered a dose of opium. Diet—milk, beef tea, and a small amount of brandy. He slept a short time during the night, but suffered a good deal of pain, for which the opiate was repeated. For some few days he suffered from fever of a low kind for which he was ordered quinine. Diet—milk, beef tea, brandy, and egg mixture. On the fever subsiding, added iron and cod liver-oil. The wound throughout looked fairly healthy, and healed by granulation, with the exception of a small portion of the centre from which a good deal of unhealthy pus came; this part of the wound therefore was probed, and a ring of dead bone was detected and removed; after this the flaps healed completely, and a good stump resulted.

REMARKS.—I note this case on account of the advanced state of gangrene; the time the operation was performed after the accident, and the setting in of gangrene; and also as the flaps were made through the œdematous tissues as recommended (I think) by Mr. Bryant.

CASE OF LITHOTOMY; REMOVAL OF TWO CALCULI WEIGHING RESPECTIVELY, 5oz. 4DR. 52GR., AND 7DR. 8GR. TOTAL 6½oz.—RECOVERY.

By A. B. MORRIS, L.K.Q.C.P.I., L.R.C.S.I., L.M., *Civil Medical Officer, Kurseong.*

SEEBOO LAUL, a tea-maker, aged 40, native of Nepaul, was admitted into the Government dispensary, Kurseong, 27th July 1876. He was brought from the Terai where he had been working for several years, during which time he had suffered much from intermittent fever. On admission the patient presented a very emaciated appearance. He complained of continual pain in the region of the bladder; frequent and painful micturition; pain in the penis and about the loins. There was a discharge of pus and blood from the urethra. From the history given by the patient, he had probably suffered from stone for years. An ordinary metallic catheter, No. 10, was passed, and almost immediately the instrument had entered the bladder (as far as I could judge), a large stone was struck.

As there were no Lithotomy instruments at hand, I was unable to operate till the 31st July. During the space of time that elapsed between the patient's admission and the above date, he was put upon milk and beef tea diet, and was ordered a mixture of quinine, opium, and nitric acid. On examination by heat and nitric acid, the urine shewed a large amount of phosphates and albumen. On the evening of the