

13th.—Silver sutures removed. Union by the first intention has taken place throughout, excepting at the point through which the ligature emerges. Here a few drops of pus escaped; bowels opened twice since last report; pulse 80 and soft; countenance composed; tongue clean; respirations tranquil; skin cool and moist; appetite good; urine healthy. The difference in the force of the pulsation of the common and superficial femoral leading to the seal of deligation, is very perceptible. No pulsation in the sac, which is hard and firm. The temperature and sensation of limb good and well sustained. Dressing as before. Fresh cotton wool to be applied to leg and thigh as high up as the wound.

14th.—Doing well in every way.

From this date the patient has progressed favorably. The ligature came away on the 29th or the 21st day, the day of operation being reckoned as the first day; but if the time were counted in hours, it became detached in 480 hours, or at the end of the 20th day. He was still kept from putting his foot to the ground, until the wound had skinned over and the obliteration of the artery had become consolidated firmly and completely.

On the 5th and 6th August he was allowed to walk, and beyond being weak from confinement to bed, he may now be regarded as perfectly well. The sac, somewhat hard, can be felt, but this is growing less daily. He thinks the left leg is quite as strong as the other.

14th.—Discharged cured.

A chart of the morning and evening temperature of each extremity between the great and second toe, and in the axilla, from the date of the operation to the date of discharge, is herewith annexed to the case:—

Date.	MORNING.			EVENING.		
	Right toe.	Left toe.	Axilla.	Right toe.	Left toe.	Axilla.
9th July.				100	97	107
10th "	99	98	99	100	100	100½
11th "	96½	96	99	99	97½	99½
12th "	97	99	99	100½	98	101
13th "	97	94	98½	99½	98	100
14th "	96½	94	97½	98½	95	99
15th "	97	93½	98	98	95½	99
16th "	97	93	98½	97	95	98½
17th "	97	93	97½	96	95	98
18th "	96	93	97	97	95½	98
19th "	96	90½	97½	96½	93	98
20th "	96	92	97	96	97	98½
21st "	95½	95	97	96	96½	98
22nd "	96	94	97	96	96	98½
23rd "	96	94	97½	97½	95	98
24th "	97	96	98½	97½	97	99
25th "	94	94	98	97	95	98
26th "	96	94	98	96	95½	98
27th "	96	94	97½	96½	94½	98½
28th "	96	94	98	96	94	98
29th "	96	93	98	96½	96	98½
30th "	96	93	97	96	93	98½
31st "	94	93	98	97	94	98
1st Aug.	95½	93	98	95	90	98
2nd "	96	93	98	96	93	99
3rd "	96	90	98½	95	93	98
4th "	95	90	98	92	92	98½
5th "	94	95	98	96	94	98
6th "						
7th "	94	93	97½	96	94½	99
8th "	92	92	98	94½	91	98
9th "	92	91	97½	95	93½	98½
10th "	93	92	97½	96½	94	97½
11th "	93	91	97½	91	91	98½
12th "	95	92	98	96	94	98
13th "	91	91	97½	92	92	98
14th "	93	91	97	97	95	97½

Deaths in the Central Provinces.—The death-rate for May was,—per 1,000—cholera 0.0, small-pox 0.0, fevers 0.8, bowel complaints 0.1, injuries 0.03, all other causes 0.16; total 1.18. There were 35 deaths from suicide (12 males and 23 females); 8 from wounds (4 males and 4 females); 142 from accident (78 males and 64 females); 82 from snake-bite and wild animals (46 males and 36 females.) Population 7,151,053.

## HOSPITAL OF THE 109TH REGIMENT.

### CASE OF ABSCESS OF THE LIVER: OF HYDATID ORIGIN?

ASSISTANT SURGEON J. CANDY, M.D., has favoured us with notes of a case of abscess of the liver which points to the pathology of that disease lately sketched by Dr. J. Cleghorn. The patient—Private D.V., aged 46, of temperate habits—reported sick on the 21st April, 1871, complaining of "loss of appetite and general malaise." 13 days after admission—on the 4th May—he complained of a "sharp stabbing pain in the right hypochondriac region, extending up to the tip of the right scapula and along the course of the superficial cervical nerves; tongue much furred; skin hot and dry; pulse 92; very thirsty; bowels irregular." He was treated with leeches, blistered, and had purgatives and nitromuriatic acid with cinchona. He improved until the 13th May, when, at 4 a.m., he was seized with acute pain in the right side, followed by great dyspnoea: this was succeeded by collapse from which, under stimulants and local counter-irritants, he partially recovered. He grew weaker, however, daily and sank at 8 p.m. of 25th May. On *post-mortem* examination, a large abscess of the right lobe of the liver was found to have burst into the right pleural cavity. Three specimens of the tænia mediocanellata were found in his duodenum. The man had been subject to tape-worm for a long time. Dr. Candy surmises from the man's previous history that the abscess may have arisen from a hydatid cyst, and remarks on the rapidity of the progress of the case, and on the comparatively little distress the man felt from the empyema, after the first shock was past. The weather was very hot at the time, and that no doubt helped the fatal exhaustion.

## JULPIGOREE DISPENSARY.

### CASE OF STRANGULATED DIRECT INGUINAL HERNIA.

ASSISTANT SURGEON J. F. P. MACCONNELL, M.B., has forwarded interesting notes of a case of strangulated direct hernia operated on successfully under somewhat difficult circumstances. The patient was brought to the dispensary at night, and the only available light were two dim hospital lanterns. The tumor was as large as a child's head. There was fluctuation at its lower part, which for a time obscured the diagnosis, owing it was afterwards found to effused fluid; the strangulation was 12 hours old; the symptoms became urgent, the taxis was unsuccessfully tried, and an operation performed in the usual way:—the sac was opened; its contents consisted of inflated and congested colon; several bands—muscular and tendinous—had to be divided to permit of reduction. After-treatment consisted of water dressing, opiates and soft food. The patient made an excellent recovery, but had on the 11th day an attack of acute orchitis on the same side as the hernia, which, however, subsided under suitable treatment.

## BUXAR DISPENSARY.

### INTUSSUSCEPTION—COMPLICATED CASE.

Under the care of R. T. WRIGHT, F.R.C.S., ENG.

BABOOA, a Hindoo sweetmeat maker, aged 30, residing at Koruntadhee, was admitted as an in-patient to the Buxar Dispensary on 11th July, 1871, suffering from constipation of three weeks' duration.

A common enema brought away a large quantity of foetid black faeces, but he still suffered, so turpentine and castor-oil were given by the mouth, causing still further evacuation, but without affording much relief.

July 12th.—Tympantites in situation of ascending colon. Turpentine stupe and enema prescribed.

July 13th.—The hospital assistant reported that the above treatment had afforded temporary relief, but that the tympantites was now worse than ever. On examination, the space between the liver, the bladder and the middle line of the abdomen was found tympantic, although the bowels had acted. Chloroform was administered without producing the least diminution of the distension, so I pierced the swelling in the situation of the cœcum with a fine exploring trocar.