

and she left apparently well, except feeling some pain in the cicatrix. Subsequently, however, it returned, became open cancer, and proved fatal.

The second was a fungoid tumor of the axilla, in a healthy-looking agricultural laborer, aged twenty-one. During the harvest of 1841 he was on a waggon of corn, which happened to be overturned; in the fall he struck his side below the axilla on the shaft of a fork. No other injury occurred at the time, beyond a slight bruise, without any abrasion of the skin, and in few days he resumed his employment. Some weeks after the accident the part became painful, and a small tumor showed itself; notwithstanding its gradual increase in size, he continued working until the end of harvest, and presented himself at the hospital in September, 1842. At that time the tumor was the size of a large turnip, and possessed in its appearance, history, and progress, all the characters of malignancy; under these circumstances, it was deemed advisable not to operate, and he was discharged. In the spring of 1843 ulceration took place, with a fungous protrusion, from the effects of which he died.

The third case was malignant disease of the uterus and upper part of the vagina, in an old woman of sixty. The pain was much relieved by preparations of cicuta. She left at her own request.

CASE
OF
STRANGULATED HERNIA OF THE
LEFT SIDE,
AND
PROTRUSION OF THE CÆCUM.

TO THE EDITORS OF THE PROVINCIAL MEDICAL
JOURNAL.

GENTLEMEN,—If you consider the following case of hernia worthy of publication in the pages of your excellent Journal, I shall feel obliged by your inserting it.

I remain, Gentlemen,
Your obedient servant,
J. C. JERRARD.

Honiton, Nov. 18, 1843.

James Collier, aged *two* years, was discovered to have an inguinal rupture on the *left* side a few months after birth. The contents of the rupture have usually descended during the day, and receded spontaneously whilst in the horizontal posture at night. No inconvenience ever occurred to the child from the rupture till Tuesday, the 5th of September last, when it was observed by his mother to be larger than usual, and that he was in pain. She made repeated, but unsuccessful, attempts to reduce it from this time up to the following Friday, when I was sent for. On inquiry, I found he had passed a fecal evacuation on the Tuesday morning, but not since; that he had had repeated attacks of vomiting, and had appeared at times to be in great pain. The tumor, which descended to the bottom of the scrotum, was about the size of a large orange. I endeavored to reduce it by the taxis, but, from the incessant and violent straining of the child, occasioned by continued crying, which could not be

prevented either by promises or threats, every attempt proved futile. Considering the length of time which had elapsed since the strangulation commenced, I judged it the safer course to operate as quickly as possible, and, having obtained the consent of the parents, I returned home—a distance of three miles—for the necessary instruments. This gave me an opportunity of requesting the assistance of my friends, Mr. Devenish and Mr. Holland, who kindly and promptly visited the child with me at three o'clock in the afternoon. From the resistance which had been made by the child during my attempts to reduce by the taxis, it was very evident to these gentlemen, as well as myself, that much difficulty and embarrassment would be likely to ensue, particularly in the latter stages of the operation; our united opinion, nevertheless, was that it should be done forthwith.

Operation.

I did the operation in the usual way. The tumor having been freely laid open, and its contents exposed, it was found to consist of the cæcum, with the appendix vermiformis, and about six inches of the ileum. The stricture was divided upwards. I now proceeded to return the protruded bowels, and here, as had been anticipated, the greatest imaginable difficulty presented itself. The child, who was very strong and muscular, continued to scream and strive in the most determined manner, so that no force, which could with safety be applied, was adequate to the returning of any portion of the bowels; and I was obliged to support them with my fingers in the best manner I could for nearly an hour, when the child became exhausted, and ceased to scream and strive, at least with much violence, and I was enabled to reduce the hernia. The lips of the wound were secured by two stitches and two strips of adhesive plaster, and these supported by a bandage. A gentle dose of castor oil was given, and in the course of the evening a free passage through the bowels was procured. This was repeated daily for about ten days, when the wound was completely cicatrised. The hernia, up to this time, has never descended, the ring having been obliterated by the adhesive inflammation which followed the operation.

REMARKS.

Much of the difficulty which occurred in reducing the intestines might, in all probability, have been obviated had a *full* dose of opium been given two hours previous to the operation. It may be asked, why was this precaution omitted? The reason of the omission was, that when I was called to see the child I knew nothing of the nature of the case, consequently was unprovided with the medicine; and on returning, for the purpose of performing the operation, it was considered expedient that it should be done without any delay, as the strangulation had existed so long.

NEWLY-INVENTED ARCH-TOURNIQUET.

TO THE EDITORS OF THE PROVINCIAL MEDICAL
JOURNAL.

GENTLEMEN,—Permit me, through the medium of your excellent Journal, to introduce the above-named instrument to my professional brethren.

It is the same which was left for inspection at your