even though superficial, burns; wounds which injure large portions of skin, and extensive injuries of the soft parts generally; compound fractures of large bones, especially of the thigh; crushes of the limbs, and amputations also, especially of the thigh; the traumatic gangrene which occasionally follows injuries of the limbs; the great majority of severe injuries on the battle-field (where, in spite of bravery, there is also dread and anxiety); severe operations of any kind where there is much apprehension before chloroform is given, or where it is imperfectly or not at all administered; injuries and resections which open the large joints, particularly the knee; injuries to the thorax or thoracic organs, heart, or lungs; injuries which implicate the abdominal organs, especially the liver, stomach, or intestines, or wounds which merely penetrate its walls; intestinal obstruction, especially from mechanical causes, as internal or external strangulated hernia, intussusception, and twists. Irritant poisons, it has been well remarked, act in a similar manner to burns or irritants on the surface. Poisoned wounds and the bites of poisonous animals are often the causes of severe shock; injuries of the spine, crushes of the testicle, rupture of the eyeball, rupture of the bladder, rupture of the urethra, and extravasation of urine; hæmorrhage, intense and persistent pain—pain being always relative, and dependent on the nervous susceptibility of the individual. Injuries of the head are among the most important causes of shock, and will be again referred to as giving rise to peculiar modifications in the manifestation of its phenomena.

Those causes which act purely through the medium of the psychical functions are the more powerful emotions—joy, grief, anger, and fear. These, in rare cases, cause death; but in most cases it must be remembered that the violent emotion affects some already diseased organ, as the heart or brain. The antagonism or suspension of nerve-force will, however, again receive attention in the pathological examination of the question before us.

The causes which operate purely on the corporeal organisation are extremely rare, particularly if we exclude the influence of mental conditions which follow injuries. Yet there are cases where, with no mental alarm or despondency, shock is suddenly induced, as when a large or habitually distended bladder is completely emptied; also in cases of internal and unsuspected hæmorrhage, as in rupture of an internal aneurism, or the rupture which occurs in extrauterine foetation; in cases, also, where chloroform is completely given, and there is no prior apprehension or nervous susceptibility. It may also be seen in injuries, or loss of blood, or the action of certain poisons in enthusiasts and in the insane, whose attention is drawn away from the injury. Under these circumstances, also, it is well to remember, it is often seen that severe injuries are accompanied by, it may be, trivial shock.

[To be continued.]

AN EXTRAORDINARY MEDICAL BILL. At the commissioners' meeting at Cheltenham lately, a letter was read from Mr. Horsley, county analyst, asking for the payment of the sum of three guineas for poisoning sixty-three dogs in the months of July and August for the commissioners, and by order of the police. It was resolved that as the police ordered the execution, they should pay the account.

ON
THE MORE GENERAL EXTENSION OF
AN UNIVERSITY EDUCATION TO
STUDENTS DESIGNED FOR
THE PROFESSION OF
MEDICINE.

By CHARLES DAUBENY, M.D., F.R.S.,
Professor of Botany, Oxford.

MOST of the readers of this JOURNAL are probably aware that a great stir has been making in Oxford within the last twelve months on the subject of University extension. It had, indeed, long been notorious that, in spite of all that had been done to attract scholars to these ancient seats of learning, the number which resorted to them had by no means kept pace with the progress of the nation in population, wealth, and intelligence.

The circumstance, however, which of late had drawn the attention of Oxford men most forcibly to this want of elasticity in their system to accommodate itself to the wants of the present century, was the increasing demand for clergy created by the rapid growth of churches at home and in the colonies. And, inasmuch as the great majority of the residents belongs to the clerical profession, it was quite natural that the deficiency in the supply of candidates for holy orders revealed by the increasing number of literates, or of persons who had not received an university education, required to fill up the void which Oxford and Cambridge were inadequate to supply, should be the feature which presented itself most prominently to the eyes of an academical community. When, however, the subject was once ventilated, it could not but strike every one that, if it were an evil that perhaps one-tenth of the clergy stood in this disadvantageous position, it must be regarded as a much more crying grievance that, of those designed for the other two learned professions, not one-tenth part had received their education at an English University. Indeed, if we limit ourselves to medicine, it might be safely affirmed that scarcely one out of a hundred living practitioners can boast of an Oxford or a Cambridge degree; and that these few are usually taken from the class of physicians (those intended for surgery or general practice scarcely ever having set their feet within the walls of a college).

It was the object of a communication made by me to the British Association at Nottingham,* to exhibit the extent of the evil complained of, by laying before the Section a set of tables in which the population of England and Wales from 1671 to the present time was represented by a series of curved lines corresponding to the several dates, and in which the number of degrees in Arts and in Medicine annually conferred during the same period was severally noted. From these data was deduced the ratio of the graduates in each department to the total population of the country, expressed by stating the proportion of degrees in Arts and in Medicine to every five millions of people. Now this statement revealed the mortifying fact, that the number of degrees in Medicine conferred in Oxford had been going on diminishing at a slow but regular ratio

* See the abstract of a communication read to the Statistical Section of the British Association, at the meeting held at Nottingham in August 1866, included in the report published by Forman, Nottingham, and Hardwicke, Piccadilly.

during the last two centuries, so as at the present time to amount to less than one annually in proportion to five millions of the population.

In a letter addressed to the Provost of Oriel College, Oxford,* the Chairman of a Committee which sat at Oxford last year for the purpose of considering the subject of University extension, I endeavoured to show that this almost entire desertion of the ancient Universities by the members of both the lay professions, for whose use they were instituted equally with the Church, is an injury both to themselves and to the community; and that it arises out of abuses which, though from long standing acquiesced in as if they belonged to the normal state of things in Great Britain, would admit, nevertheless, of being rectified by appropriate measures.

In the first place, however, it is to be inquired, whether the present condition of medical education in this country is one that can be contemplated with satisfaction. On this subject, I cannot do better than refer to my pamphlet, as I have there summed up in a few sentences the ordinary course of study pursued by a student who is intended to fulfil the duties of a surgeon or of a general practitioner, and which, indeed, is often resorted to by the aspirant to the higher rank of physician.

"The youthful aspirant to the privilege of piloting Her Majesty's subjects through the most difficult quicksands of disease has no sooner left his grammar-school than he becomes apprenticed to an apothecary, with whom he spends at least three years—it was formerly five—engaged in the mechanical employment of compounding medicines, and happy if he can pick up from time to time such scattered crumbs of medical information as may fall from his master's dispensing-table. After this, he is sent for about three years to London, where he has at one and the same time to commence those scientific studies which are to form the foundation of his professional education, and at the same time to build up that superstructure of medical and surgical knowledge which is to serve him as his guide through the intricacies of private practice during the rest of his life.

"He is, in short, to acquire a mastery at once over such sciences as Chemistry, Anatomy, Physiology, Botany, Materia Medica, and the Theory and Practice of Medicine; and, to crown all, he must attend to the clinical instruction afforded in the great medical schools of the metropolis.

"And thus, whilst he has perhaps six or seven daily lectures on different subjects to attend to, he must find time nevertheless to go through the process which is technically called *walking* the hospitals. With all our devotion to the Peripatetic Philosophy, we Oxonians, I imagine, would hardly attach much value to such Peripatetic teaching as this.

"It is much the same as if a youth destined for holy orders were, after leaving school, to be boarded in the house of a country curate, in order to learn what he could pick up of the details of parochial work, and after this, without passing through the University, were to be transferred at once to some theological seminary, where he would be indoctrinated at one and the same time in what are styled 'the Humanities' and in the mysteries of theological lore—mingling in his poor bewildered brain Cicero with St. Augustine, and Plato with Chrysostom.

"So much for the professional training to which the aspirant to medical practice is subjected.

"But what shall we say of that other portion of a sound and liberal education, which comes under the category of moral and religious training?

"The medical student, at the most critical period of his life, is plunged into the midst of a vast metropolis, without the slightest moral supervision, the smallest check over his conduct or demeanour!

"All that is required from him as a passport to the privileges of a practitioner is, that he should produce certificates of having been present for a certain fixed time at the prescribed courses of lectures, and at the clinical practice of the hospitals; as well as of his having arrived at the recognised standard of medical knowledge, as tested by his examination.

"Of his attainments in other respects no account is taken, except that a *modicum* of Latin is expected; nor is it likely that any moral delinquencies he may have been guilty of would ever reach the ears of his examiners, even if they felt it within the range of their jurisdiction to take cognisance of them.

"Now, without underrating the merit of the lectures, the value of the professional instruction imparted, or even the silent influence which a high and healthy tone of morality on the part of the teachers must often exert upon the character of the pupil, I cannot but contend that such a system, or rather want of system, might admit of improvement.

"If, for example, the time allotted to apprenticeship with a country apothecary were applied to an attendance on scientific lectures in Oxford, it cannot be disputed that the student, when he afterwards repaired to London, would be in a better condition to reap advantage from the clinical instruction thus afforded, and at the same time more able to give his undivided attention to the practical details of his profession.

"And, moreover, without pretending that the system of moral superintendence pursued in Oxford is as complete as it might be made, no one can doubt that certain checks are imposed upon immorality, and that a higher tone of feeling prevails amongst the young men than is general elsewhere."

In this representation, as I admitted in the appendix to my pamphlet, a few particulars have been overstated; for since my time certain improvements have been introduced, both with respect to the number of lectures imposed at one time upon the pupil, and as to the degree of license allowed him during his residence in the metropolis. The former, instead of amounting to seven or eight a day, as was the case formerly, are limited, it seems, to fourteen a week in winter and twelve in summer during the first year of his residence, and are reduced still further in the succeeding ones.

Something, too, is now done in the way of moral superintendence for those who choose to submit to it, by offering to the medical students chambers in buildings attached to one or two of the larger hospitals wherein regular hours can be insisted upon.

Still it is equally true, that the sciences which constitute the basis of a medical education must in general be deferred until the student resorts to the metropolis; and that no effectual barrier can be opposed to vice and extravagance, in the midst of a vast metropolis, by any practicable system of collegiate or hospital regulations. And these considerations, doubtless, coupled with the heavy expenses involved in a residence in London, which, although much exceeded, it is feared, by the majority of University students, is nevertheless greater than what a youth of frugal habits need calculate upon at either of these ancient seats of learning, induce most prudent parents* to defer the period of "walking the hos-

* Letter to the Provost of Oriel College, Oxford, on University Education.

* I say prudent parents, because I fear that many are induced, by a wish to hurry through the studies of their sons as quickly as possible, to send them to London much earlier. Such a course, however, cannot easily be defended with a view either to their morals or proficiency.

pitals" until a youth has attained the age of manhood, and thus often drive them to the expedient of boarding him, after leaving school, with an apothecary, who is expected to take charge of his morals, and at the same time to give him some desultory hints as to the routine of medical practice, as well as to initiate him into the art of compounding drugs.

These objects, however, important as they doubtless are, especially to the general practitioner, need not engross the whole time of the student, and might be rendered compatible with keeping terms at an University, if the student devoted to them those six months of vacation which every undergraduate claims as his own. Indeed, it would be easy to cite instances where, by this combination of medical with academical training, a youth has secured a degree at an University at the very time when he was fulfilling the duties which enabled him to claim the privileges accruing from an apprenticeship with an apothecary.

The advantages of such a course are apparent enough; for, by devoting his attention during the time spent in Oxford to a study of those sciences which, like chemistry and anatomy, constitute the basis of a professional education, he would avoid the necessity of having his mind diverted, whilst in London, from the observation of cases in medicine, by the simultaneous study of several subjects, and these of such intricacy as, for their perfect mastery, to demand the almost entire devotion of the mind for the time being. And those who, with myself, believe in the tendency of classical and mathematical studies to develop the faculties of the youthful mind, and to enlarge the field of his ideas, would not grudge the time spent in acquiring that amount of preliminary learning which is ensured at Oxford by the examination for Moderations.

Most persons, I presume, will agree with me in thinking that a really good medical education embraces "something more than the regulation standard of professional attainments; that it implies a general development of the faculties of the mind by early discipline, some amount of general information on subjects unconnected with the profession, the habits and feelings of gentlemen, and a moral and religious training."

But, after all, it will be said, the obstacles in the way of this project must be considerable, or why else is the public so apathetic as to make but little use of the advantages placed within their reach? These impediments are of various kinds; but perhaps they may be all comprised within the four heads under which I summed them up in the paper read to the Statistical Section at Nottingham.

First, there is the prevailing notion that neither professional nor even scientific knowledge can be acquired so well at an English University as elsewhere. Were this objection a valid one, it would leave no room for further discussion; nor is it surprising that the public should still entertain it, since it was fairly applicable to the state of Oxford only a few years ago. "It would, indeed, have been a mockery to invite a medical student to Oxford at a time when physical science formed no part of the University curriculum; when chemistry was relegated, like a sort of occult science or black art, to the underground apartments of the old Ashmolean building, with an endowment so scanty that my worthy predecessor was compelled from lack of means to keep down his scientific aspirations, and treat such pursuits as quite subordinate to his medical duties; and when anatomy had no *status* in the University, and was left to the scanty encouragement doled out to it by a private college. But, since the period alluded

to, the University, in obedience, as some will have it, to the pressure from without, but, as I would rather believe, from a due appreciation of the duties imposed upon it as trustee to the large funds for educational purposes placed at its disposal, has not only recognised the class of studies alluded to, but has also erected a building for their cultivation, which, in its collections of natural history, its lecture-rooms, its library, its dissecting-rooms, and its laboratories, furnishes all the appliances for scientific research which the most ardent student can desire, and which is under the direction of a staff of professors who, to say the least, will not suffer by comparison with those of any other rival establishment in Great Britain."

Nevertheless, it would be regarded as preposterous, even with the examples of Göttingen and Heidelberg before us, to put forward Oxford as a rival to London or any other city of large dimensions as a school for clinical instruction; all that is intended even by the most sanguine promoters of this scheme being, that an University, in which such means of instruction are provided, might equally well supply that sound elementary information in the cognate sciences, without which the art of medicine is little better than mere empiricism.

But here comes in the second class of objections, which weigh with most parents more, perhaps, than any other: I mean the great outlay which an Oxford education is supposed to entail. And it must in candour be admitted, that the public are warranted in forming their estimate of this, not so much from the statements put forth from time to time as to the charges for lodging, board, and tuition, which, no doubt, are such as would alarm few parents, but from the average allowances of money made to the generality of undergraduates, with the sanction, or at least without the disapproval, of the college authorities. For it is perhaps too much to expect that a youth should possess sufficient self-control to debar himself from those indulgences which he sees his companions all around him partake of without scruple or censure. This, however, is an obstacle which equally applies to the scheme of inviting a poorer class of students to the University for the purpose of filling up the ranks of the clergy, and must be met by its advocates by some plan or other for diminishing the expenses of those for whose benefit it is intended. And, if such a plan be matured, it would be but fair that the same class of needy students destined for either of the lay professions should participate in its advantages. In the meantime, I may observe, that the parents of all the youths destined for the medical profession cannot be placed under this category; and, moreover, that those who do come under it might often find, in the scholarships now established in Oxford for the encouragement of physical science, the means provided for relieving them of a considerable part of the outlay involved in an Oxford education.

But many a parent, whose circumstances are such as to allow of his sending his son to an University, is startled by the third objection stated in my communication; namely, that the student is compelled to devote the greater part of his time during his residence at Oxford to the dead languages, thus throwing back pursuits of a more professional character to a later period of life than that at which they are commenced elsewhere. Now, it is well that the public should be informed to what extent this objection applies to the system at present pursued amongst us. It is no longer the case, that classics are insisted upon during the whole period of the undergraduateship; for, after the first eight terms, or two years from the time of matriculation, the stu-

dent is now allowed to follow his own line of study. Moreover, the University may be regarded as in a transition state on this subject; for, as the amount of classical learning which is to form the basis of a liberal education has been agreed upon and defined by statute, it is hardly conceivable that we should long persevere in refusing to receive the evidence of its attainment which is afforded by the examination for Moderations until so late a period as is the case at present, thus virtually precluding the undergraduate from commencing his special studies till two years later than might be otherwise necessary, and cramping him within the trammels of his classical harness long after he has arrived at the goal for the sake of which it was assumed; and all this in obedience to the dictation of the non-resident members of the University, most of whom have left it so long, as to be presumed unable to exercise an independent judgment upon the working of our present educational system, even if they had ever concerned themselves in such matters, and in opposition to the voice of the majority of the existing tutors, who had previously declared their approval of the change. At present, however, the parent would do well to appreciate the advantages which his son would derive from an Oxford scientific training, even with the drawbacks alluded to, and to balance them against the risk of sending him prematurely to London, or the stagnation of intellect consequent upon the limited instruction on such subjects attainable in a provincial town. Our system, it is true, involves, as a condition, the possession of a larger amount of classical learning than is required for a London licentiate; but not more than any lad of moderate abilities might acquire at a good school by the time he reached the age of 17.

And in what better manner, I would ask, can a youth intended for the profession of medicine employ the earlier years of his life, than in studies which, however alien they may seem to his future calling, would tend to correct the narrowness of mind which is the sure consequence of an exclusive addiction to one class of studies, whether literary or scientific?

To regard that rudimentary knowledge of the classics, which all boys of ordinary capacity could attain to, as if it were thrown away upon those who are not intended to make literature their leading object in after life, is as preposterous on the one hand, as the reluctance of some college tutors to relax their hold over their classical pupil after he has attained this stage of progress is on the other.

The absurdity of excluding from the mind of youth every kind of knowledge which has not a professional bearing, is only equalled by that of preventing a student, who obviously wants either the capacity or the inclination to proceed beyond the threshold of classical learning, from entering upon a line of study more congenial to his habits and tastes, for the mere sake of drilling him in one or two additional books of Greek or Latin.

Such a proceeding is only calculated to engender a life-long distaste for all literary occupation, by associating it with a painful recollection of the drudgery of the process gone through, and of the unsatisfactory nature of the result obtained.

One other objection still remains to be considered. I mean the danger apprehended lest, by daily intercourse with a class of youths intended for different walks of life, a tone of mind should be contracted at the University not in harmony with what would conduce to the successful career of a medical man.

This objection it is the more difficult to meet, because it is so often urged by the very persons who are impressed with the belief, that the constant daily intercourse and intermixture of youths aiming at

different objects in life, and taken from various classes of society, is one of the greatest advantages of the collegiate system. They, therefore, ought to be the first to protest against the only sure method of preventing the evil anticipated; namely, the setting apart a separate hall or establishment for medical students in particular.

Such an expedient, indeed, would probably never find favour with persons who could afford their sons the ordinary indulgences which an Oxford undergraduate regards as his privilege; but to those of slender means it seems to hold out the best security both against the lavish expenses incurred by their wealthier brethren, and also against the acquiring of habits and tastes which, although harmless in themselves, would be out of character with their future position in society.

It does not seem, however, that there is much chance at present of any such hall for medical students being established amongst us; and it may also be feared that the University is not as yet ripe for another change, which, without the formality or expense of founding a separate establishment, would effect the same purpose; namely, that of permitting the student to reside in private lodgings, where he might freely adapt his style of living to his finances, and where he would have no temptation to indulge in the habits of his wealthier contemporaries.

There seems, therefore, to remain only one other practicable method of attracting to the University any large number of the poorer class of students, whether intended for the clerical or for the lay professions; and I cannot help thinking that, if the clergy are in earnest in their endeavours to recruit the ranks of the ministry from a lower class of society, they will ultimately be driven to resort to some such expedient. If you cannot materially reduce the expense of residence at an university, you may at least shorten its duration; and this is what has been suggested in the Affiliation Scheme, recommended in the report of one of the subcommittees organised to consider the subject of University extension.*

In this report, it is proposed that degrees should be conferred in Oxford, after two years' residence, on persons who had obtained their previous education in certain colleges elsewhere situated, which should be chartered, and duly represented by the University itself.

Were this scheme adopted, a student intended for the medical profession might come up to Oxford at 18, ready to pass his Moderations, and thus be able to devote the two subsequent years spent at the University to the special studies required for his professional career. He would thus be able to resort to the metropolis at the age of 20, with an intellect developed and refined by a previous course of liberal learning, as well as a thorough mastery of those sciences which are regarded as essential in every branch of physic; and he would be enabled, in consequence, to devote his whole time to pathological studies, by an unbroken attendance at the great hospitals where such knowledge is best imparted.

Such, to my mind, is the *beau idéal* of a thorough English medical education; and, although it cannot be fully realised until certain changes have been introduced into our academical system, still, even under existing circumstances, a parent who is more solicitous that his son should be well instructed in all branches of his profession, than that he should be enabled to begin practice with the least possible expenditure of time and money, would do well to consider, whether a

* This and the other reports are now collected in a pamphlet, published by Macmillan.

course of study, commenced at a good classical school, continued at Oxford, and completed in London, would not be more likely to accomplish his object, than the smattering of knowledge obtainable from a country apothecary, succeeded by the high-pressure system resorted to at the metropolis.

Throughout the greater part of this letter it may be thought, that I have spoken as if there was no other English University in existence than that of Oxford.

This, however, has arisen, not from any disposition to disparage the sister University of Cambridge as a place of medical instruction, but from my imperfect acquaintance with the system therein pursued. A comparative estimate, indeed, of the advantages afforded in these two great seats of learning for the study of the special sciences which are connected with our profession, would come with better grace from some one wholly unconnected with either place, than from any of their own members.

One thing, however, an Oxonian need have no scruple in admitting—namely, that Cambridge has the start of us in two particulars—namely, first, in allowing its *freshmen* to begin their special studies from the commencement of their residences, on placing themselves upon the physic list; second, that the obligation to live within the colleges is there dispensed with, so that a youth of slender means is not obliged to adapt his style of living to that of the wealthier students around him.

These circumstances may account for the more thriving condition of the Cambridge Medical School, which, although far from what we should wish to see it, numbers, it is said, more pupils than we can at present boast of in Oxford.

FIBRO-CELLULAR TUMOUR OF THE RIGHT BUTTOCK AND LABIUM,

PASSING DEEPLY BESIDE THE RECTUM AND THE VAGINA: OPERATION: RECOVERY.*

By T. SYMPSON, Esq.,

Surgeon to the Lincoln County Hospital, etc.

THE infrequency of the occurrence of fibro-cellular tumours in the neighbourhood of the female genital organs, the uncertainty of their diagnosis when so situated, and, oftentimes, from the presence of deep attachments to important parts, the difficulties attendant upon their removal, induce me to bring the following case before the meeting. For some portion of the notes I am indebted to our House-Surgeon, Mr. Samuel Mills.

A. W., aged 45, was admitted into the Lincoln County Hospital, under my care, on February 19th, 1866. She complained of a sense of weight and uneasiness about the right buttock, which, on inspection, appeared considerably larger than the left, and to the touch afforded a peculiar sensation of elastic resistance.

She was a well-built, strong-looking woman, of florid complexion, generally enjoying good health. She had, for about a year and a half, noticed increasing enlargement of the buttock, for which she had consulted several medical men, one of whom made a deep exploratory incision, which gave exit only to a little blood. She had been married twelve years without having borne children. For five years or more she had been troubled by frequency of micturi-

tion, having often to pass urine twice in an hour; but this was unaccompanied by either pain or difficulty. She had not been incommoded in defecation. The skin was natural; the tongue clean; the bowels regular; the urine natural; the pulse 96, feeble; the catamenia regular. She was placed upon ordinary diet.

February 21st. No action of the bowels yesterday. Tongue slightly coated. She was ordered to take immediately six grains of rhubarb, and three of hydrargyrum cum creta.

February 22nd. After consulting with my colleagues, I made an incision four inches in length, along the inner aspect of the buttock, so that the resulting cicatrix might be out of the way of pressure in sitting. By this the tumour was partly exposed, and at first looked so like the sac of a hernia as to suggest the idea of an error in diagnosis having been committed; a little further dissection, however, dispelled the doubt, but removal of the mass proved very difficult, as one long process passed forwards into the labium, and by the side of the vagina, and another upwards and backwards very deeply along the rectum, to which, and to the sacro-sciatic ligaments and coccyx, it was firmly adherent. After removal of the posterior portion of the tumour, something closely resembling it in appearance was seen low down in the wound. Traction was made on this by vulsella; but, some fæces appearing, it was desisted from, when a transverse rent, large enough to admit the tip of the index finger, was found in the rectum. Some small arteries spouted freely at the commencement of the operation, but the hæmorrhage soon ceased, and no ligature was required. The edges of the wound were approximated by six silver wire sutures, a pad and bandage. The patient was then sent to bed. The operation commenced at 11 A.M., and lasted nearly three-quarters of an hour.

3 P.M. After the operation, notwithstanding the administration of large quantities of brandy, the patient was in an extremely feeble condition, and her pulse was scarcely perceptible. At 3 the house-surgeon was called to see her, and, finding a good deal of general oozing of blood from the surface going on, he reapplied the pad and bandage. She was collapsed, shivering with a cold surface, and almost pulseless. Brandy and hot tea were given copiously, and reaction slowly set in during the afternoon.

February 23rd. She had a good night, and felt easy this morning; skin moist; tongue slightly coated, moist; pulse 80, small and weak; the bowels had not acted; she had passed urine during the night; there had been no return of bleeding. There was a dark discoloration of the edges of the central part of the wound, and the discharge, which was pretty free, had a gangrenous odour. Two sutures were removed; a charcoal poultice was applied; she was ordered to have milk, beef-tea, and eight ounces of sherry daily, and to take five minims of tincture of opium in an ounce of camphor mixture, every four hours.

February 27th. The surface of the wound was cleaning, some granulations were appearing, and the sloughs were separating. The treatment was continued, and she was ordered to have a mutton-chop.

February 28th. She was much improved in strength; the surface of the sore was covered with healthy granulations. She was tired of the sherry, and was ordered to have eight ounces of port daily, and fancy diet; the opiate mixture was omitted.

March 1st. She was looking better, and had a pretty good night, but complained of a sense of fullness and uneasiness of the abdomen; the bowels had not been relieved since the operation; there was

* Read at the Annual Meeting of the Midland Branch, June 31st, 1866.