ration on the anterior part of the tongue. I have sometimes divided the *frænum linguae* in persons who stuttered, but without benefit, as might have been foreseen. As to the indications of this operation, they are much more difficult to seize than those for the operation of strabismus. The importance of so severe an operation as this is, the danger which accompanies it, the loss of the tongue which might result from gangrene, from suppuration, or from the awkwardness of an assistant, are considerations which must prevent it from being attempted by any but the skilful and experienced operator. Within a short space of time I have operated on fourteen persons affected with stammering, by removing a triangular portion of the tongue, and all the patients have been completely cured of their impediment. At the present day, when it is so much the fashion to modify the most simple modes of operating, surgeons will have a wide field for their invention; instruments of various kinds will be discovered, and men skilled in the antiquity of the art will have an opportunity of inventing new names; to them I shall leave the task of baptizing the operation. The number of individuals on whom I have operated amounts to nineteen; several are still under treatment; but all the cases promise to terminate in a satisfactory manner. Professor Mueller has examined the excised portion of the tongue, and found that it was chiefly composed of the genio-glossi, styloglossi, and hypo-glossi muscles.—*Gaz. Med. de Paris*, March 13, 1841.

CASE OF TUMOR OF THE PELVIS.

By J. TOOGOOD, Esq. Bridgewater.

SOME years since I was consulted by Mrs. Ash, of Catcott, on account of difficulty of making water, which had existed for three weeks. An attempt had been made to pass the catheter, and partial relief only had been obtained. She had strong pains recurring at short intervals, like those of labour, at each of which some urine was forced away. On laying my hand on the abdomen, a large tumor, like the uterus imperfectly contracted after delivery, but more circumscribed, and harder, could be felt; and on passing my finger into the vagina, the tumor was also distinctly felt, occupying the whole of the pelvis, excepting a small space near the pubis, where the finger could be passed with difficulty. It was connected to the posterior part of the vagina by a firm membranous band, hard and unyielding, feeling much like a child's head included in a thin uterus, and pressed firmly on the meatus urinarius and rectum. She had occasionally experienced some difficulty in making water, but never until now had retention. She was obliged suddenly to get out of bed from an urgent desire to make water, without being able to pass any. These symptoms first appeared a year before, but had never become so troublesome as to demand attention. It appeared strange that a tumor should have attained so considerable a size without producing greater inconvenience or pain. By bending the catheter very much I drew off about two pints of very offensive water with relief. On my next visit, I attempted to raise the tumor with my hand, and succeeded so far as to allow some water to flow; but a strong pain soon replaced it in its former situation. The catheter was again passed. The next morning I punctured the tumor with a strong lancet; but as nothing followed, and as but little pain was occasioned by it, I passed a knife into it for about two inches, and divided it freely in four different directions, in the same manner as the head of a child is opened. A little blood only followed, and very slight constitutional disturbance. The catheter was passed every day, but a good deal of water ran away in the intervals. The operation did not appear likely to be followed by any benefit, and I consoled myself for my want of success, with the assurance that no mischief had been done by it. Five days afterwards I found her sitting up, describing herself as feeling pretty well, and passing the contents of the bladder and rectum easily, and without

pain or involuntary discharge. On the following day, having drank some new ale, she vomited violently, and was purged, and suffered much from pain and retention of urine, which continued for three days, when it abated, after which she had a copious discharge of matter from the vagina. On examination, the tumor was found considerably lessened, and the aperture I had made widely open, and discharging freely. The discharge gradually lessened, and at the end of three months entirely ceased, by which time very little remains of the tumor could be felt. I had frequent opportunities of seeing this patient for many years after the operation, and was much gratified to know that she never experienced any return of the disease.

I felt wholly indebted for my success to the late Mr. Park, of Liverpool, who published some cases of tumors in the pelvis in the *Medico-Chirurgical Transactions*, which he had treated in the same way. I detailed all the circumstances to that gentleman, from whom I had the honour of receiving the following letter:—

"DEAR SIR,—Accept my thanks for your communication through Mr. Palmer, of a case which has excited in my mind reflections that did not arise out of my own cases. An important question is, what was this tumor? Was it or was it not ovarian? We know that many of those that have occurred as obstructing parturition, were of that description, such as that of Dr. Merriman, to whom I feel obliged for the handsome mention he has made of my paper. The doctor has observed that I gave no opinion respecting the nature of my cases. In this he is correct; and why did I not do it? It was, because I had learned, more than twenty-five years ago, from a source that I did not feel at liberty to quote, that two cases had occurred in London, which terminated fatally, in both of which the tumors were found to be ovarian; but from the same source I received an account of another, in which there were found no less than four tumors seated in the broad ligament. These could not be all ovarian, if any one of them was. Now, as I think that some were ovarian, and others not, and as all those on whom I operated recovered, I forbore from expressing any opinion; but now I venture to express my belief, that the case of the farmer's wife in West Derby was fully as likely to be ovarian as of any other nature. In this case mere puncture could do no good; and it was not till I had nearly cut it in two that it enabled the head of the child to drop so much as to enable Mr. Myers to deliver by the perforator and crotchet. In this case, as in yours, this free incision laid the foundation for the dissolution of the tumor. Now, whether yours was ovarian or not, I will venture to ask whether there would be any more danger in making such an incision per vaginam into an enlarged ovary, than into a tumor of any other description, or any less room to hope for equal success in getting rid of the disease; and, therefore, whether, in many cases of incipient ovarian diseases, it might not put a stop to the further progress of an affection, which, if suffered to proceed, proves almost invariably fatal? As I have not seen your case in print, I conceive it has not yet appeared there; but I think it ought not to be withheld from the public eye.—With due regard, I am, dear Sir, yours truly.

Liverpool, June 21, 1822.

H. PARK."

J. TOOGOOD, Esq.

OPERATIONS FOR STRABISMUS.

TO THE EDITORS OF THE PROVINCIAL MEDICAL AND SURGICAL JOURNAL.

GENTLEMEN,—Having lately had opportunities afforded me of performing the operation for strabismus by section of muscles, in eight cases; and as these present some features, if not of a novel, yet of an interesting kind, I have much pleasure in taking the advantage of your ably-conducted Journal to lay them before the profession.