plaint merely to cold, as he has enjoyed a good state of health, and is, from his own account, a man of temperate habits. Except occasional aperients he took no other medicine than the copaiba and benzoic acid mixture, and at his last attendance at the infirmary considered himself quite relieved in all his symptoms. This was one of the milder description of cases, arising from his age more than from any other cause.

CASE IV.—John Brook, aged 57, was troubled last winter with great uneasiness in making water, for which he received relief from medicine and dietetic treatment. He was admitted an out-patient of the infirmary in the early part of this winter, with an attack of his old complaint of more than ordinary severity. The pain was very great in passing his water, which, he says, comes away in drops; says that he has been more or less troubled with this affection for three or four years, although a man of temperate habits; apparently no part is affected but the urinary organs, and his bowels have been kept regular by occasional aperients. The use of linseed-tea and barley-water causes less distress in passing water, though there is still a considerable sediment. This man took little else than the balsam of copaiba mixture, with the benzoic acid, for about six weeks, when he expressed himself as decidedly relieved, and in the enjoyment of more ease than had fallen to his lot for the last few years past.

There are some other cases of a similar description, occurring in patients at an advanced stage of life, which I find in my note-book, but differing so little either in the symptoms or the treatment, from those already described, that I should be inexcusable in occupying your pages with mere repetition. I may mention, however, that in one of the cases the use of the benzoic acid mixture was followed by a rash over a great part of the body. This, however, is a circumstance by no means peculiar to benzoic acid, as other medicines have in some instances, from some peculiarity of temperament, produced the same effect. Permit me to recommend, therefore, to your readers a further trial of the utility of this powerful acid. It is very sparingly soluble in cold water, but is soluble, without change, in alcohol. The benzoates, however, I believe, are soluble in water, and the benzoate of ammonia may, in some instances of dysuria senilis, prove more efficacious than the simple acid. The benzoic acid is a constituent of balsam of Tolu, of Peru, benzoin, storax, &c. &c. It will probably be found that, in other complaints as well as diseases of the urinary organs, its efficacy may be much greater than we have hitherto been led to expect.

CASE OF SUCCESSFUL

AMPUTATION IN SPREADING GANGRENE,

FROM

GUN-SHOT WOUND.

By JONATHAN TOOGOOD, Esq., Surgeon, Bridgwater.

As every additional fact illustrating a doubtful point of practice must possess some value, I hope the following corroboration of the soundness of the practice adopted by Mr. Dodd, in a case of spreading gangrene, as related in your Journal of the 22nd of January, will be acceptable to your readers. Until M. Larrey proposed amputation in cases of traumatic gangrene, I believe the unfortunate subjects of that disease were abandoned to their fate. Such has been my experience in public and private practice. The idea of an operation under such circumstances was universally reprobated, and the surgeon who ventured to propose it, subjected himself to the imputation of rashness and inexperience, and was considered to have acquired but a very imperfect knowledge of his profession. I

confess that it has always appeared to me better to offer the patient the chance which a doubtful operation would afford than leave him to certain death, and I have never ceased to regret having yielded an opinion to others in two cases in which subsequent experience justifies me in believing that the operation would have been successful. It was, therefore, with great satisfaction that I found the opinion of so high an authority as M. Larrey coinciding with my own, which at once determined me to carry the plan into effect whenever an opportunity offered. The following case occurred in the practice of Mr. John G. Toogood about two years since.

Charles Tuck, a farm servant, aged 24, received the contents of a common fowling piece in the hand on Friday, the 4th of February, which passed up the flexor muscles and through the integuments of the forearm about three inches above the wrist. A neighbouring surgeon saw him soon after the accident, and directed cold applications and rest. On the following Monday he was admitted into the Bridgwater Infirmary. There was a ragged wound at each opening, the limb was but little swollen, and the only unfavourable appearance was, that the nails looked rather dark coloured. There was very little constitutional disturbance. He was put to bed, a poultice applied over the whole limb, and the usual treatment directed. On the next day the aspect of the limb was the same; but as there was more swelling in the evening and some heat, leeches and fomentations were ordered. He slept perfectly well until five o'clock the following morning (Wednesday), when he was awoken by pain, which rapidly increased and became very severe. At seven o'clock the limb was found to be gangrenous to the elbow, and before his consent to its removal could be obtained, and the necessary preparation made, it extended so high up, as barely to leave room to amputate close to the shoulder joint. There was no line of demarcation, but I cannot, at this distance of time, recollect the precise point to which the crepitus extended, but I am inclined to believe it was quite up to the joint, as it was debated whether it would not be the safest plan to remove the bone from the socket. Very little blood was lost during the operation; the constitutional irritation subsided in a few hours; the patient became tranquil and soon recovered.

The result of this case proves, that it would have been better to have removed the arm below the elbow on his admission; but the appearance of the limb, and the state of the patient, warranted the attempt to save it, although the discoloration of the nails excited some suspicion in my mind, and occasioned me to watch its progress with great anxiety. The rapidity with which the gangrene spread was very remarkable. There was no such appearance at five in the morning, the operation was decided on and performed soon after eight.

February, 1842.

CASE OF OVARIAN DROPSY.

By J. B. KISSAM, M.D.

Mrs. D., aged thirty-five years, is the mother of ten children, had enjoyed good health till Feb. 1840, when she discovered an enlargement in the right side of the abdomen, and œdema of the lower limbs; in two months after she ceased to menstruate. Fluctuation being perceptible in the tumour, the use of calomel, squills, and digitalis was determined on. Under this treatment there was a decided diminution of size, and a single return of the monthly secretion. In September, however, the abdominal swelling again showed itself, with extensive anasarca of the lower half of the body, and of the abdomen, so great as to