the seat of which was at the neck of the sac. The operation being completed, and the patient placed in bed, five grains of calomel, with five of compound extract of colocynth, were given three hours afterwards; and every three hours a drachm of Epsom salts was given, with fifteen grains of carbonate of magnesia, and every six hours an aperient enema was administered.

June 29. Bowels not moved; abdomen enlarged, tympanitic, and painful on pressure; tongue brown and dry; pulse 120. Bled to twenty ounces; took five grains of calomel and a grain and a half of opium, and repeated three hours afterwards. The bowels moved two hours after the bleeding. Two grains of calomel and one quarter of a grain of opium taken every three hours, and the salts and magnesia continued.

30. Abdomen still tympanitic, but not so painful on pressure; pulse 100; twelve leeches applied; bowels moved. Enema, if necessary, to be daily used.

July 1. Passed a good night; bowels freely moved; mouth rather sore; abdomen still painful on pressure; twelve leeches applied; salts and magnesia continued; one grain of calomel and a quarter of a grain of opium taken night and morning.

2. Abdomen admitted pressure well; tongue cleaner; mouth sore; pulse 100; diarrhoea troublesome. Chalk mixture given, and the calomel, &c., omitted.

3. Not visited. Directed fifteen grains of nitrate of potass, and five drops of tincture of foxglove, to be given every three hours.

4. Bowels not moved since having taken the chalk mixture; abdomen not quite free from pain on pressure; pulse 98. One drachm of Epsom salts, and fifteen grains of nitre, and six drops of tincture of foxglove, were administered every three hours.

5. Not visited. Bowels moved.

6. Abdomen perfectly free from pain; bowels moved, and in a natural state; tongue quite clean; pulse 80; wound rapidly healing. Ordered her merely to take two drachms of salts daily.

On giving her a friendly call on Friday, the 15th of July, I was much gratified to find her perfectly well. A few days afterwards she left her situation, and went to reside with her parents at Tipthorpe, a village not many miles from Wharram-le-Street.

MILLIPEDES DISCHARGED FROM THE HUMAN STOMACH.

By A. W. DAVIS, M.D., Presteign.

[Read at the Exeter Meeting of the Provincial Medical and Surgical Association.]

A boy, fifteen years of age, the son of a labourer named Griffiths, living in the village of Bucknill, near Knighton, had for some months complained of pain in his stomach, which did not yield to common remedies. On the 9th of June his mother gave him an emetic of antimonial wine, after which he vomited a considerable number of millipedes (wood-lice), an insect of the genus scolopendra. They were mostly alive and full grown, but wanting the brown color of those found in natural situations. These were white. I happened to be in the neighbourhood, and being apprised of the circumstance by my friend, Mr. Warren,

I accompanied him to the place, when we were fortunate enough to secure some of the insects, which are now in Mr. Warren's possession. I had the testimony of the mother and neighbours that they would have half filled a common sized teacup.

In a practical point of view, such a circumstance is of little or no value; but I submit this short notice to the meeting from a natural desire one feels to communicate to them whatever is unusual. I think there can be little doubt that the ova had been swallowed by the boy with his food. I find the insects frequently buried in bacon, which is sometimes eaten raw by hungry children.

ON THE MINUTE ANATOMY OF THE LUNGS.

By M. BOURGERT.

[Read before the Academy of Sciences, July 11.]

When a thin slice of a dried and inflated lung is examined under the microscope (magnifying from twenty to fifty times), we see that the whole surface is divided into small, irregularly circular cavities, which are divided by septa of various thickness, enclosing the vessels. On examining these cavities carefully, we find that those whose orifices are perpendicular, extend downwards to a considerable depth; hence they are not vesicles, but *canals*. The canals present the same appearance, whatever the inclination of the section of the lung may be. They present every variety of direction, are very flexuous, and communicate freely with each other on all sides. The canal never appears to terminate in a cul-de-sac or blind extremity. Each canal communicates with the neighbouring ones, and, moreover, receives in its passage the orifices of one or more canals; I have counted as many as seven in the wall of a single horizontal one.

Thus, the general idea of the capillary apparatus of the lung is an assemblage of flexuous canals, anastomosing in all directions, but nowhere direct canals without anastomosis, or vesicles. The canals are, as I have said, inclined in all directions, and all communicate with each other, so that the orifice and exit are confounded in the same point; hence each lobule, with its single bronchial orifice, is a miniature of the lung, of which the trachea is at once the orifice and the exit.

I have called these canals the labyrinthic canals, to distinguish them from the branching canals, in which the bronchia terminate.

To understand these latter, we must study the structure of the lobule. Each lobule commonly receives a single bronchial ramification; but if it be large, it may have two or three branches; the small branches terminate laterally in the manner presently to be described, while the continuation of the chief branch descends to the basis of the lobule, and winds round it, giving off branches, to reach one of the angles of the lobule. From the central branch are given off innumerable secondary ramuscles, which radiate from its subdivisions, and which I would call the branching canals; beyond these latter commence the labyrinthic canals. The former terminate in the latter in the following manner:—The bronchial canal, in its trajet, first opens laterally into one or more