by the administration of the following medicine, with its accompaniment:—

Hydriodate of potass, two drachms;
Water, one pint. A tablespoonful twice a-day.

The nitric oxide of mercury ointment to be used at the time of taking the medicine.

This mode of treatment was persevered in, and the woman now (after having left off taking medicine four months), instead of being a disagreeable object to every one as well as herself, presents as clean and clear a face as either you or me.

I am, Gentlemen,
Yours, &c.,

HARRY R. LARKE.

Whitchurch, Salop, Jan. 21, 1843.

CASE OF STRANGULATED FEMORAL HERNIA— OPERATION.

By J. D. OWENS, Esq., M.R.C.S.L.

The number of persons of both sexes that suffer from hernia, and the danger at all times to be apprehended when the protruded bowel cannot be returned by the means usually employed, render it necessary to give more than ordinary attention to this class of diseases; and the anxiety and alarm of the patient and friends, aroused by the worst anticipations, the baffled endeavours to afford relief, and the hopelessness that seems in prospect, certainly require the exercise of much firmness and intrepidity, and an exact and confident diagnosis. Yet, happily, although so frequently occurring, from the facility with which the intestine is reduced in most instances, it is rarely required to perform the operation—particularly in provincial practice; therefore, in the present case, when the operation was required, the report may be of some interest. It will be observed that the symptoms were obscure throughout, and the strangulation, that existed seven days, so subdued and hidden as hardly to indicate the impending mischief. However, the function of the bowels being obstructed, the sympathetic pains so often complained of, the nausea and sickness more or less persistent, were themselves prominent symptoms of strangulation, but perhaps the peculiarly tense and resisting nature of the tumor conveyed to the practised hand a sensation almost convincing. The operation revealed a segment of intestine protruded through the saphenal aperture, incarcerated by adhesions of long standing, and the stricture bound it so rigidly that not even the flatus it contained could be expelled; at the same time the circulation continued unimpeded, the pains in the part were only slight and transient, and the healthy condition of the viscera remained unchanged.

Dec. 26. I was early this morning requested to visit Mrs. Martha Hughes, Newton's-green, near Craven Arms. The messenger stated her case as being one of twisted bowels, and that she had been without an evacuation for three days. She had a femoral hernia of some years' standing, and a few months preceding her present attack had sought assistance when there existed incipient symptoms of strangulation. The bowel, however, returned sponta-

neously. The history she is able to give of her case is unconnected and imperfect. Has noticed the tumor in the groin often, but it did not trouble her. Thinks it had been always down for some time past; whenever she felt the lock (even when lying down) remembers the kernel was there. Is much nauseated, and vomiting frequently a greenish dark fluid; it is mixed with bile and gastric secretions, but free from stercoraceous odor; she, however, represents the earlier ejections as being very foetid. The hernia in the left groin, the size of a walnut, protrudes from behind Poupart's ligament, is of globular shape, and so tense and firm that the finger cannot impress it; the position of the patient does not affect it, nor does it receive any impulse from coughing. No constriction nor dragging experienced in the abdomen, but erratic pains are ranging about the parts. Employed the taxis; the direction of the patient was so inclined as to relax muscular resistance when compressing the tumor between the fingers and gently urging it downwards from over the falsiform margin, with the other hand it was kneaded inwards and upwards in the line of canal. The attempt was unsuccessful.

Seven, p.m. Castor oil given in the morning was rejected unchanged almost immediately, and a persistent nausea induced. From time to time the slight wandering pains were present, but the taxis again applied was borne pleasantly. According to some late writers, the elevation of the extremities and full doses of opium have done wonders; here they failed; the parts were guarded from active inflammation arising, by a refrigerating mixture applied in a bladder.

27. Had a restless and weary night; slept a few early hours, but sickness and transitory pains had caused her much disturbance this morning; bowels unevacuated; pulse small and fast; tongue white; the glance of the hand on the abdomen causes her to shrink away, but the pain is relieved by firmly directed pressure; the taxis again failed; hitherto the more active and decisive measures had been in abeyance. The patient being sixty-eight years of age, affected with chronic tarsal ophthalmia, and greatly harassed by an old asthma, it seemed judicious to delay as long as quite safe the severer claims on her constitution; but the peculiar condition of the tumor and the eccentric sensitiveness already noticed, rendered further delay hazardous. I therefore bled her from a large orifice to fainting, placed her in a warm bath, injected infusion of tobacco in small quantities, increased until the system was fully influenced, perseveringly using the taxis; and, as these means failed, I announced an operation as inevitable. Eight, p.m.: A consultation was held; the physician considered the case as one of simple incarceration, and gave a favorable prognosis. Prescribed opium and a truss with a hollow pad; could only reiterate the danger and trust to time; the smallness of the hernia augured unfavorably.

28. Restless night; disturbed and anxious mind; the morbid insensibility of the peritoneum recurring at short intervals. Warm flannels placed beneath her linen gave relief; gave a dose of castor oil, and administered a turpentine enema; the latter was rejected, immediately bringing with it the contents of the rectum in a scybalous mass; the oil was rejected in six hours by severe vomiting, it caused much pain

and distress. The patient stated that she was sensible of the medicine to the parts obstructed; the intestines seemed to herself to act upwards, and she experienced relief when the contents were evacuated; palliative treatment merely.

29. Met, at my request, Messrs. Baines, surgeons. The patient's symptoms were still of the same character; pulse fast and small, not hard; tongue dry and brown; bowels unrelieved by any further motion. The above-named gentlemen immediately concurred in the opinion I had already expressed, and the operation was decided on. The patient consented.

Operation.—A bed was arranged, the patient conveyed thither and placed in position. I divided the integument by the $\perp$ incision. The superficial fascia was next raised on a director, and divided by a sweep of the bistoury; the cribriform fascia was now in view, its layers were cut through, the adipose tissue cleared away, and the hernial sac exposed; it was thickened and indurated, firm and tense with flatus, with a pen-shaped neck hanging by a small pedicle from the apex; to rub the sac between the fingers so as to separate the intestine was quite impracticable; the forceps could not hold, but by lateralising the scalpel and pitting the surface by slight scarifyings it was readily seized; the director was now passed and the sac opened; the intestine exhibited the blue color indicating healthy condition of the viscera. Caution was required from the dense nature of the sac and the numerous adhesions existing, which rendered its separation a delicate proceeding; the stricture was found at Gimbernat's ligament, and so rigidly clasping the intestine that the finger-nail could not be inserted without inflicting injury; the director, however, was insidiously passed and the knife traversed into the cavity, when, by carefully turning it upwards and cutting inwards, a few fibres of tendon were divided. The intestine was now easily reduced. On exploring, the ring adhesions were attached to its inner edge; two small vessels furnished blood and were tied; the parts were brought together by a few sutures, interspaced by strips of plaster, and apposition maintained by a lightly turned roller. The patient was now removed to bed, having exhibited great fortitude and spirits, and all exertion was forbidden; the bowels were opened the following day, and continued to act regularly.

The subsequent history of the case became protracted from sloughing of the integument, induced in great measure by the patient's constant coughing preventing union by the first intention; otherwise, the general recovery was rapid, and presented nothing deserving record. A truss adapted to the parts to be worn regularly.

Haymoor, Salop, Feb. 2, 1843.

SUDDEN DEATH FROM INJURY TO THE TESTICLES.

In some parts of Germany a barbarous custom exists, in cases of quarrel, of violently compressing the testicles.

M. Schlesier, of Peitz, relates a case of sudden death from this species of injury. The patient fell to the ground, was seized with violent convulsions, and died in a few minutes.

PROVINCIAL MEDICAL JOURNAL

SATURDAY, FEBRUARY 18, 1843.

The present session of Parliament promises to be one of great interest to the medical profession. Sir James Graham has formally announced his intention of introducing a general measure of medical reform. Last week Mr. French brought forward a bill for the better regulation of medical charities in Ireland; and on Tuesday last Mr. Mackinnon obtained leave to bring in a bill for the purpose of improving the health of towns, by preventing interments within their precincts.

These are, all and each of them, grave and important matters, affecting the interests of many, and the health and well-being of the whole community. For many years has the medical press been engaged in fruitlessly directing the attention of successive governments to these and many other subjects of similar import. Our entreaties were unheeded, our arguments cast away upon dull ears or hardened understandings. No one attempted to deny the justice of our demands, or the vast importance to public health of the questions which we agitated; yet government after government passed away without any effort having been made to redress the grievances of the profession, or any desire having been shown to protect and improve the health of the public.

We *had* no representative in the Imperial Parliament; we *have* no representative there, for the only man fitted, by his talents and special knowledge, to occupy the honorable post of medical advocate in the House of Commons, is precluded from so doing by the necessity of passing his time elsewhere, to earn his daily bread.

Instead, then, of boldly coming forward to support our principles, and demand, with a firm voice, redress of our evils, we—the members of the most honorable, the most scientific, and the most useful profession which exists—are obliged, like beggars, to pick up any crumbs of comfort which may be cast to us, and to be thankful for the most miserable of mercies. We are, in truth, a patient and a long-suffering race, ready, when one cheek has been kicked, to turn the other also, and to bear all sorts of humiliations with the meekest submission.

Some there are amongst us who, without returning evil for evil, would fain do battle as becomes men; others, inspired with the purest motives of humanity, are content to do good for good's sake; to suffer neglect, offer passive resistance to oppression, and pursue, with untiring zeal, the noble, but ill-requested purpose of conferring material blessings on mankind in spite of themselves.

Let us follow, politically, the example of the latter,