facts, that we can arrive at anything like a just or satisfactory conclusion. In these lectures I have dwelt upon the anatomy of the parts perhaps more than you may consider necessary, but I have done so because it is absolutely impossible for you to understand anything whatever of these or other dislocations unless you are acquainted with this part of the subject, especially the action and arrangement of the muscles and the direction in which they exert their influence. You will then, I think, agree with me when I explain to you the various methods employed for the treatment of these accidents, that patients were exposed to unnecessary violence which might frequently have been avoided had our forefathers paid more attention to these points.

Some of the continental surgeons differ as to the directions in which the head of the bone can be luxated. M. Velpeau denies the possibility of a dislocation directly downwards into the axilla, and in our own country Sir A. Cooper limits his description to dislocations downwards and inwards. M. Malle, Professor of the Faculty of Medicine at Strasbourg, however, describes luxations directly downwards, which, according to him, may be either complete or incomplete. M. Sedillot also relates a case of luxation of the shoulder downwards directly beneath the glenoid cavity, in front of the scapula, but behind the *teres major* and *latissimus dorsi* muscles. The head of the bone in this case was thrown between the *teres minor* and *major* muscles, resting in front of the scapula and long head of the *triceps*. Desault, Velpeau, Boyer, and others, admit only of two forms of primitive luxation of the shoulder, namely, into the axilla, and on the *infra-spinal fossa*. According to these gentlemen, the other varieties are consecutive. M. Malgaigne, however, describes five principal dislocations of this joint. He says the most frequent is where the head of the bone lies beneath the *coracoid process*; he calls this the "sub-coracoid;" next, luxations inwards; luxations completely downwards, of which he had only met with the account of three cases; incomplete luxation below the *coracoid process*; luxation backwards, into the *infra-spinal fossa*, or what he denominates "sub-acromial." He completely rejects the idea of consecutive luxation from muscular contraction. Dupuytren also considers primitive luxations forwards as very rare, but he admits that they may occur. This disputed point, however, has been set at rest by Mr. Crampton, of Dublin, who has published a case of this variety of dislocation, which I will relate to you when we treat of these accidents.

CASES OF EPIDEMIC CHOLERA, TREATED BY TRANSFUSION.

By DAVID TORRANCE, Esq., Rugby.

[Read at the Anniversary Meeting of the Provincial Medical and Surgical Association Aug. 8th, 1844.]

It is known to many present, although perhaps not to all, that in the year 1832, when the Asiatic cholera was making its ravages in this country, the village of Newbold-upon-Avon, about seven miles from Rugby, was visited by that dreadful scourge. It continued its ravages in the village for about five weeks; the population at that time, including the strangers that were at work on the new cut of the Oxford canal, was 530, and out of that number 235 were attacked by the disease. It is with feelings of satisfaction that I am able to inform this meeting that the deaths only amounted to 21; my object at the present time, however, is to bring before the meeting the great benefit I experienced from transfusion. It was at the wish of my friend Dr. John Conolly, that I was induced to try its effects. During the time the epidemic was raging in the village, I was visited by most of the medical gentlemen in the neighbourhood, and amongst others, I was favoured with a visit from Dr. Conolly. On that day I had a great many cases under treatment, but only one that was not doing well—in fact, he was rapidly getting into the state of collapse. Dr. Conolly, on seeing him, said "I do not think you can save that man, but I wish you would try Dr. Latta's suggestion of transfusion, and the following is, from what I can recollect, the proportions of the mixture to be employed:—

Muriate of soda 2 drachms.

Carbonate of soda 2 scruples.

Two quarts of water at the temperature of 96°."

That was the mixture used in the first case. The following day I had a letter from Dr. Conolly informing me that the mixture ought to contain seven grains of chloride of potassium which was used in the other six cases.

CASE I.

Richard Bates, aged 40, married, an agricultural labourer, of sober habits, rather weakly in constitution, was seized about noon, with violent vomiting and purging of gruelly-looking matter, accompanied with severe cramps in the lower extremities; he had been ill about two hours when I was called to him. I did not use the lancet in this case, which I generally did when called in on the first appearance of the disease; but his pulse was so very weak that I did not deem it prudent to bleed although the spasms were most violent. I immediately gave him ten grains of calomel and two of opium, with some aromatic confection, and half an hour after, on ounce of the following mixture:—

Carbonate of soda 2 drachms.

Aromatic confection 2 drachms.

Aromatic spirits of ammonia 2 drachms.

Compound tincture of lavender 2 drachms.

Tincture of opium 1 drachm.

Peppermint water 7 ounces.

In three hours Bates had taken twenty grains of calomel, twelve grains of blue pill, five grains of opium, and four doses of mixture, and he also had several small quantities of brandy and water and beef tea. I had two or three people constantly employed in using frictions

with mustard and salt, but in spite of all my efforts, in five hours and a half from the time I saw him he was in a perfect state of collapse, pulse not perceptible at the wrist, but on applying the hand to the region of the heart, a sort of straggle could occasionally be felt; eyes sunk; features sharp; the body covered with a cold clammy sweat; all spasms now gone; the fingers very much shrivelled; the nails quite blue; the body stretched out and quite motionless. I now determined to try the effects of transfusion. Not having a proper transfusion apparatus, I fitted a blow-pipe to the tube of the stomach-pump. I then opened a vein in the right arm and introduced the blow-pipe, and by the time I had injected into the vein a quart of the mixture, the medical gentlemen that were present could distinguish the pulse at the wrist. By the time the three pints were thrown in, the body was becoming warm and the pulse much stronger, and when I had finished injecting the two quarts, the eyes, features, voice, and hands, had become quite natural, as well as the heat of the body, and he was able to speak loudly and tell us that he felt very much better. I then withdrew the blow-pipe and secured the arm, and ordered him the following pill:—

Blue pill		3 grains.
Ginger		2 grains.
Opium		$\frac{1}{4}$ grain.

To be taken every two hours, and a dose of the mixture an hour after each pill. Beef tea and brandy and water at intervals.

In about an hour the purging again returned, but no vomiting, and slight cramps in the arms and legs, and in four hours he was again in the state of collapse. I then opened a vein in the left arm, and injected into the system two quarts more of the saline mixture, which again thoroughly established re-action. The pills were ordered to be continued, and the mixture, beef tea, brandy and water, as before.

In two hours he was again slightly purged, accompanied by the cramps in the legs and arms, but no vomiting, and in six hours from the last transfusion he was again in the state of collapse. I then opened another vein in the right arm, and injected two quarts more of the saline mixture; re-action was again produced, and he was ordered to go on with his medicines as before. He had no further return of the purging or cramps, and from this time he gradually progressed without a single untoward symptom; the pills and mixture were continued till the motions were tinged with bile, and all he required afterwards was a saline febrifuge, with a mild and nourishing diet. It was more than thirty hours before he passed any urine.

CASE II.

John Smith, aged 40, an excavator, a very muscular man, but having the general failing of that class, being fond of smoking and drinking. He had been very drunk the night before, and was seized in the early part of the morning with violent and constant vomiting, and purging of watery stools, with slight cramps in the legs; he did not then call any assistance, as he was willing to think that the vomiting and purging were from the last night's debauch. The people with whom he was lodging were not aware that he was ill, till attracted to his room by his screaming, from the violent cramps in his legs, arms, and in his

bowels also. He had very rapidly got worse from his constant exertion of getting up. It was near seven o'clock in the morning when I was called to him; he was then suffering with violent cramps in the legs, arms, and bowels, very frequent vomiting, and the gruelly-looking matter constantly running away from him as he lay; body covered with a cold clammy sweat; breathing short and laborious; pulse 58, small, and very weak; tongue quite cold; breath felt cold; features very much shrunk; eyes quite sunk in their sockets; could only articulate in a whisper; fingers quite shrivelled; nails blue. I ordered him the calomel bolus, and a dose of the mixture, the same as prescribed in the preceding case, half an hour after, and small quantities of warm brandy and water frequently, with constant frictions with the mustard and salt, and heat to be applied. I saw him again at nine o'clock; vomiting and purging not quite so frequent, but the cramp still very violent, all the other symptoms much the same as at seven o'clock. Repeated the calomel bolus and the mixture half an hour after it, and at ten o'clock he was to begin the plue pill, as in the former case, taking it every hour, and half an hour after each pill two tablespoonfuls of the mixture, with a little brandy and water at times; the frictions and the heat to be persevered in.

At 1 o'clock I was hurriedly called to him, as the attendants thought he was dying. On my arrival I found him in the state of collapse. I immediately got my stomach-pump and blow-pipe, and had the mixture ready in a very short time. I then opened a vein in the right arm, and injected two quarts of the saline mixture, which produced complete reaction. To go on with the blue pill, mixture, and brandy and water as before, and to have a little beef tea at times. Between two and three he appeared to be doing very well, had no return of the vomiting, very little purging with slight cramps at times. At four o'clock the purging was much increased, and at five he was again in the state of collapse. I then opened a vein in the left arm and injected two quarts more of the mixture, which again produced reaction. Medicine, brandy and water, and beef tea to be continued as before; he appeared to be improving, and had very little purging. No other bad symptoms till about ten o'clock, when the purging became more frequent, and was accompanied with cramps in the legs and arms, and by eleven o'clock he was again in the state of collapse. I again opened a vein in the right arm, and injected two quarts more of the mixture, which had the desired effect of again producing re-action; to go on with the medicine, brandy and water, and beef tea, as before. From this time he continued to go on favourably, the medicines were continued till the motions became bilious, and afterwards he took a saline febrifuge with mild and nourishing diet. No urine was passed for forty-four hours.

CASE III.

James Thompson, aged 35, an excavator, of most intemperate habits, had been drinking very much the night before, (had been in the same company as Smith,) was seized between five and six o'clock in the morning with violent and very frequent vomiting and purging, and as he expressed himself, it was nothing but water that came from him; he had also slight cramps in the legs and arms, with a great feeling of weight at the pit

of the stomach; did not call any assistance then, as like Smith, he was willing to believe that it was only the effects of having drunk too much beer, and he was able for some considerable time to get up to relieve himself. The people where he lodged did not apply to me till near two o'clock in the afternoon, and as I was then particularly engaged with another patient, who I was fearful would get into the state of collapse, I sent him the ten-grain calomel bolus, and a dose of the mixture, the bolus to be given immediately, and the mixture in half an hour after, with directions to use frictions, with mustard, till I came. It was near four o'clock before I could get to him, and he was then in the state of collapse; no pulse to be felt at the wrist; body covered with a cold, clammy sweat; eyes sunk in their sockets; countenance, from being plump, looked sharp and haggard; hands and fingers quite shrivelled; nails blue; had not been able to articulate or swallow for the last half hour. I sent immediately for my stomach-pump, and by the time the messenger arrived with it, had the mixture all ready for transfusion. I then opened a vein in the right arm, introduced the blow-pipe, and by the time I had injected about half the quantity the pulse could be felt at the wrist very distinctly, and the surface of the body began to get a little warm. When I had injected the two quarts, he opened his eyes, stared about him, and asked in a most audible voice what we had been doing to him. I ordered him the blue pill, mixture, &c., as in the other cases. Half an hour after the transfusion he vomited a considerable quantity at one gush, was afterwards purged, the purging being frequently accompanied with cramps in the legs, arms, and bowels, and in three hours he was again in the state of collapse. I then opened a vein in the left arm, and injected two quarts more of the mixture, with the same good effects as at the first, and this time commenced with the calomel bolus and mixture, and in an hour after to be followed up with the blue pill, mixture, and brandy and water. No return of the vomiting or purging for about two hours, when he had several gruelly stools, accompanied with cramps; the motions became more frequent, and in five hours he was again in the state of collapse. I then opened a vein in the right arm again, and injected two quarts more of the mixture. Reaction was again thoroughly established, and from this time he had no untoward symptoms; the medicines, &c., were continued the same as in the other cases. He was rather more than forty hours before he passed any urine; he was able to return to his work in a fortnight from the first day of his attack.

CASE IV.

James Hill, aged 34, married, a slight made man, of intemperate habits, and tipsy and fighting the night previous to his attack. I was called to him about six o'clock, and found he had been seized about four in the morning with violent and constant vomiting and purging of watery stools, accompanied with severe cramps in the bowels, legs, and arms. I found the body covered with a cold clammy sweat, pulse 52, very weak and small, voice nearly gone, tongue quite cold, breathing very short and laborious, breath felt quite cold, hands and fingers shrivelled, nails blue; was making constant signs for something to drink. I then gave him the calomel bolus, mixture,

frictions, &c., as in the other cases; the vomiting and cramps were slightly relieved, but the watery motions kept gushing away from him at times; repeated the calomel bolus, &c.; the purging, however, continued, and by nine o'clock he was in the state of collapse. Having now got the proper transfusion syringe and tube, I opened a vein in the right arm, and introduced the tube, and had injected nearly three pints before there was the least symptom of reaction, but on completing the transfusion of the two quarts, reaction was then perfect; the pulse was quite distinct, firm, and good; the countenance, voice, and heat of the body, natural. Ordered him the blue pill, mixture, &c. In an hour after the transfusion there was slight return of the vomiting, with frequent purging, cramps again very violent in bowels, legs, and arms, and in two hours he was again in a state of collapse. I then opened a vein in the left arm; the veins being very small, I had considerable difficulty in getting the tube into the vein. I then injected two quarts more of the mixture, which again produced reaction. Ordered to go on with the medicine, &c., as before. Having experienced so much difficulty in getting the tube into the vein, and being fearful of another relapse, I determined to retain the tube in the vein. I therefore separated the elastic tube of the syringe from the tube that was in the vein, had a wooden plug made to fit, and secured it properly down to the arm, leaving a person that I could depend on to watch the arm; in about an hour the purging and cramps returned, but no vomiting, and in two hours he was again in the state of collapse. I then injected two quarts more of the mixture, being very careful in having the fluid at the mouth of the elastic tube of the syringe, and withdrawing the plug from the tube in the vein, and pressing a little of the thick treacly blood through the tube, and having the fluids at the mouths of the two tubes before attaching them, so that no air could be forced into the vein. He was ordered to continue the medicine, &c., as before; he went on favourably for three hours, when the purging and cramps returned, and in four hours he was again in the state of collapse. Having attached the elastic tube of the syringe to the tube in the vein two quarts more of the mixture were injected which again established reaction. The medicine, &c., were persevered in, and he continued for four hours without a single unfavourable symptom, but immediately after that he was again purged very much with cramps as severe as at first, and in six hours from the last transfusion he was in the state of collapse for the fifth time. I was obliged to be absent from the village for nearly three hours, and on making my way to this patient's house, I met Mr. Blanshard, of Welston, coming away from this patient; he told me that the man was dying, if not already dead, and that he did not think transfusion would be of any further service to him. Having seen the wonderful effects of it, I determined to give him a fifth trial for his life. Neither Mr. Blanshard nor I could distinguish the least pulse, nor any action of the heart; hands and fingers were very much shrivelled, and the nails very blue. When I had injected the half of the mixture, the action of the heart was slightly distinguished, and by the time that three pints were thrown in, the pulse became perceptible; and when the injection of the two quarts was completed, Mr. Blanshard, and several of the relations, who were standing by the bedside, were

quite astonished to see him open his eyes, and hear him ask for something to drink; reaction was again most completely established. In eight hours, as he had no return of the purging, but was favourably progressing, I withdrew the tube, it having been in the vein twenty hours; he continued gradually improving, and no untoward symptom presented itself till the evening of the second day, from the last transfusion, when he was seized with all the symptoms of congestion of the brain. I bled him twice a day for the next three days, taking about twelve ounces each time; the blood was highly inflamed, buffed, cupped, and puckered at the edges. He was also now blistered, and took a saline febrifuge with antimony. It was about fifty hours before he passed any urine; his recovery was gradual but perfect.

CASE V.

Ann Webb, aged 15, a slight delicate girl. About a week previous she had a very sharp attack of the cholera, but had perfectly recovered by taking blue pill, opium, and a stimulating mixture; when she was seized the second time, having some of the pills and mixture left, she had recourse to them, her parents not thinking it necessary to inform me at first; and by the time that I was called to her the purging and vomiting were incessant, and the cramps most violent. She appeared then to be rapidly sinking into the state of collapse, which she did in spite of all the stimulants we could administer, both by the mouth and friction. I opened a vein in her right arm, and very gently injected three pints of the saline solution, which perfectly restored reaction; she was then ordered to go on with the blue pill and mixture every two hours, and to take a little brandy and water and beef tea in the intervals. After the first hour the purging returned, with slight vomiting, and also the cramps in the legs, arms, and bowels; in four hours she was again in the state of collapse. I then opened a vein in the left arm, and gradually injected three pints more of the mixture; reaction was again established: this time I plugged the tube and left it in the vein, in fear of another relapse. For two hours there was no return of the vomiting, purging, or cramps, but soon after that time slight purging, with cramps in the legs and arms, came on, and in six hours she was again in the state of collapse. I had this time to inject the whole two quarts, before reaction was properly established. She was then ordered to continue her medicines, brandy and water, and beef tea as before. She went on from this time till the third day without an untoward symptom, when she had all the symptoms of congestion as in the case of Hill. The first day I bled her twice, taking ten ounces each time; the blood was very much cupped, buffed, and puckered at the edges; she was also blistered on the spine, and had a saline febrifuge, with very small doses of antimony. The second and third day she was bled once only, the blood being still highly inflamed; her medicine was continued. From the third day she gradually improved; her recovery was much more rapid than Hill's. It was rather more than forty hours before she passed any urine.

CASE VI.

William Lampit, aged 38, an excavator, a very muscular, powerful man; had only come to the village the

day previous to his being seized, and was quite drunk at night. When I was called to him I found he had been ill for several hours, with violent purging and vomiting, accompanied with very severe cramps in the bowels, legs, and arms, and in spite of the large doses of calomel and opium, and the stimulating mixture with brandy and water, he was very quickly in the state of collapse. I opened a vein in the right arm, and injected into the system two quarts of the saline mixture; reaction in this case was so complete, that he said he felt quite well, and asked some of his companions for a chew of tobacco. We had some difficulty in persuading him to remain quiet in bed, although a quarter of an hour before, neither pulse nor action of the heart could be distinguished, the eyes were sunk in their sockets, and the countenance had that pinched appearance denoting death, the body was stretched out, and covered with a cold clammy sweat, the hands and fingers shrivelled, and the nails quite blue. Reaction in this case being so complete that I did not anticipate another relapse, I withdrew the tube from the vein, and ordered him to take the blue pill, opium, and mixture, as the others. The first hour he had no return of the vomiting or purging, but continued very comfortable, but very soon after, the purging with slight vomiting and cramps returned, and in three hours he was again in a state of collapse; the veins in the left arm were so small and deep-seated that I could not get the tube into any of them, I was therefore obliged to open a vein in the right leg, near the outer ankle, into which I injected three pints of the saline mixture, when reaction was again completely established. I this time left the tube in the vein in case of another relapse; reaction was as perfect this time as the first, as he kept talking and joking with his companions very soon after the transfusion was completed. The first two hours he kept gradually improving, but very soon after the purging and cramps returned, but no vomiting. In five hours he was again in the state of collapse; this time I was obliged to inject the whole of the two quarts before reaction was properly established. From this period he had no return of the purging, vomiting, or cramps, and he went on gradually improving till the fourth day, when the symptoms of congestion made their appearance. He had considerably more stupor than either Hill or Webb, was constantly sleeping and snoring, and it required considerable exertion to rouse him. I bled him twice the first day to the extent of sixteen ounces each time; the blood was very much cupped, buffed, and puckered at the edges. He took the saline febrifuge, with small doses of antimony, and was blistered on the spine. The next day he was very much better. Contrary to my orders, some of his companions were allowed to see him, and they carried him from one room to another; and I have no doubt they had also been giving him spirits to drink, as the following morning the symptoms of congestion were as bad as ever; I bled him again that day twice, taking sixteen ounces each time; the blood was as much inflamed as before. He was blistered on the chest, and his medicine, &c., continued. The following morning he was again bled to the same extent, the blood as before, and his medicine, &c., continued. He expired in the evening, the ninth day from his seizure.

The following morning I made a *post-mortem* examination. On removing the skull we found the veins

on the dura-mater completely gorged with very dark treachy blood; the sinuses were also gorged; the substance of the brain and cerebellum was healthy; no extra fluid in the ventricles. On laying open the thorax we found the right lung with the exception of a portion the size of the palm of a small hand, completely hepatised, and the pleuræ firmly adhering together, so that it required the scalpel to separate them; the left lung was quite healthy and rather above the usual size; the heart natural and healthy; the stomach, liver, spleen, and all the abdominal viscera were quite healthy, with the exception of the kidneys which were flabby, and the bladder which was very much shrunk.

CASE VII.

Daniel Flake, a slight made man, an excavator, came to the village in the evening, and passed the night in a hovel; was seized during the night, but did not know the time, with very violent and incessant purging of gruelly matter and severe cramps all over him; had been ill some time when he was discovered by chance, and there was a great deal of time lost in getting him carried to a place that had been fitted up for an hospital. By the time that I was called to him he was in the state of collapse. From the result of the three last cases, I had determined not to inject so much as two quarts at a time, if reaction had at all commenced, at all events to stop when the pulse could be distinctly felt at the wrist; I also determined to try the effect of keeping the heat of the mixture up to 108°. I opened a vein in the left arm, and very gradually injected three pints of the mixture, at which time the pulse was quite distinctly felt at the wrist. I then withdrew the tube and banded up the arm, and ordered him the pills and mixture as in the other cases. After the first hour he had a return of the vomiting and purging, with the cramps in the legs and arms, and in two hours he was again in the state of collapse. I then opened a vein in the right arm, and gradually threw in three pints more of the mixture, when the pulse again could be distinctly felt at the wrist, reaction being perfectly established; this time I plugged the tube and left it in the vein; to go on with the medicine, &c., as before. After the first hour he had a return of purging, but no vomiting nor cramps; in three hours he was again in the state of collapse. I then withdrew the plug from the tube in the vein, and began to inject gradually, and by the time I had injected a quart of the mixture reaction was quite perfect, the pulse being distinct and good at the wrist. I then plugged the tube and secured it as before, and ordered him to go on with his medicines, &c., and he went on comfortably for three hours, when the purging returned, accompanied by slight cramps and in four hours he was again in a state of collapse. Once more I had recourse to the transfusion, injecting very gradually, and by the time I had thrown in a quart reaction was again properly established, the pulse being distinct. From this time he kept progressively improving, the medicines were continued till the motions were tinged with bile, the tube I allowed to remain in the vein eight hours after the last transfusion; he recovered without a single untoward symptom. All he required after the liver began to act was a little castor oil. It was about forty hours before he passed any urine.

CASE OF ENORMOUS STEATOMA, REMOVED FROM THE SHOULDER.

By EDWARD DANIELL, Esq., Newport Pagnel.

Mr. Marshall, a farmer, of Cranfield, Bedfordshire, applied to me in the spring of 1840, complaining of pain and uneasiness in a large tumour, which had existed for thirty years, and occupied a space commencing from the top of the shoulder, running over the deltoid muscles, dipping slightly into the axilla, and stopping about the middle of the humerus. As it appeared to be purely steatomatous, I should have advised him not to interfere with it, but it was so exceedingly painful at times, that his rest was disturbed by it, and it prevented him from lying on the affected side. About the centre of the tumour was a red spot, upon which he could not bear the slightest pressure, and what appeared to me as rather a singular feature in this case, was, that precisely under this red spot was a hard substance, as though an extraneous body had been introduced into it. I recommended him at once to submit to an operation, which I doubted not would be successful, and that medical treatment even to allay pain, would be wholly nugatory. By my advice he consulted my friend Mr. Harris, of Bedford, and the opinion of Dr. Witt was likewise taken. Each of these gentlemen corroborated my views, and on the 16th of June he took lodgings in Newport, and I performed the operation in the presence of Mr. Harris, and Mr. Thurnhill, House Surgeon to the Bedford Infirmary, and five of my medical brethren residing in Newport and the neighbourhood.

The tumour was removed in two minutes and a half; it was as usual in these cases, a mass of fat, but on opening it, was discovered to have in its centre a deposit of bony matter—a complete ridge of ossified deposit, of about three inches in length. The tumour weighed two pounds and a half, entire, and as many little portions of fatty matter were taken away after the removal of the bulk, it is fair to infer that the whole tumour was little short of three pounds. It was only necessary to pass a ligature round the main vessel, which might perhaps be about the thickness of a crow-quill. The patient did well, and has not suffered in the least since the operation.

I must here express my obligation to Mr. Harris for his very valuable assistance in the operation.

CASE OF WARTY EXCRESCENCE NEAR THE VERGE OF THE ANUS.

By EDWARD DANIELL, Esq., Newport Pagnel.

A deaf and dumb girl, about 15 years of age, came under my care with a warty excrescence growing on each side of the anus; it extended over and filled up the fossa made by the buttocks, and resembled, when those parts were drawn aside, a large orange which had been cleft in twain. From close examination I felt satisfied that it had no kind of connexion with the interior of the rectum, but that it was purely a diseased growth, wholly cuticular. Small tumours of a similar description were attached to the eyelids. Mr. Rogers and Mr. Collison saw the case with me, and in the course of their practice they had not met with any analogous case. They entertained the same opinion as myself, namely, that it was not malignant, but simply