the vascular structure as I could, and then drove the liquid in until it returned back by the sides of the needle. This first injection I made rather to the outer side of the tumor, then I again injected it in the same manner on the inner or nasal side, meeting the other injection. About, I think, fully one drachm of the liquid remained inside, and the tumor was increased fully one-half in its bulk, and became as hard as a piece of cartilage.

On the second day after the operation, the line of demarcation of a large slough was plainly visible, and on the fifth or sixth day after, the slough came away. It consisted of a large portion of the tumor, with the coagulum formed by the iron solution The opening left by the slough extended to the eyeball, leaving the ciliary margin of the eyelid intact. I then left it to heal by granulation, which it did very slowly, after the lapse of over three months, requiring the occasional touching of nitrate of silver and sulphate of copper to the granulations, and now at the date of this writing, it has healed completely, leaving a long narrow cicatrix at the fold of the eyelid, and the child can open the eye almost as wide as the other one. I think the sloughing away of a narrow portion of the eyelid was an advantage, as, if it were possible to remove the tumor without that occurring, an operation for ptosis would be called for, from the great stretching of the structures of the lid.

The case is of interest, as the use of per-chloride of iron in nævus has fallen into discredit from a number of fatal cases resulting from its use. The per-sulphate acts in the same way as a coagulant of the blood, and I cannot see the advantage of one over the other, in fact, as a styptic, I would give the per-chloride the preference.

In *Waring's Therapeutics*, third edition (Sect 922), he states that it should not be used in cases of nævus about the head, face or orbit, and states that there have been several fatal cases from its use, and refers to case of Mr. R. B. Carter (*Med Times & Gazette*, Sept. 5, 1863). A fatal case of Mr. Teale's, the younger of Leeds, is also referred to by Gross; cause of death supposed to be formation of an embolus and its passing into the circulation May it not have been from the incautious admission of air?

The carotid artery has been tied on several occasions for the cure of this disease, and seldom with success, and when such an easy method of cure as that by injection of either the per-chloride or