

in the vessel, the blood welled forth to a very serious extent. The difficulty in the way of the operator was necessarily considerable.* The hemorrhage being of alarming extent (threatening an immediately fatal issue), and pressure above the sac being wholly ineffectual, it was judged expedient to enlarge the wound upwards, and secure the common femoral just below Poupart's ligament. This proceeding was adopted, but it failed to diminish materially the loss of blood.

Only by pressing firmly two fingers over the lesion in the artery, could the hemorrhage be somewhat controlled. After some delay, the hand of an assistant being thus placed, the vessel was dissected out, and a ligature placed above and below its lesion. This was evidently longitudinal, and as far as could be judged, more than an inch in length. The patient was greatly exhausted, and stimulants were freely given. Three sutures were placed in the wound, the sides were drawn together by adhesive plaster, and wet lint applied to the surface; there was no bleeding subsequently. No difference in the temperature of the affected limb. A flannel roller was applied from the foot upwards. Some sickness and vomiting occurred within the first hour or so, but the nausea soon subsided. An opiate was ordered with good effect in the evening, and effervescing draughts of carb. of ammonia with hydrocyanic acid, with a little beef tea and jelly, freely administered at intervals. His progress from this time until the 24th was most satisfactory. The wound, at first rather foul and sloughy, cleansed, and rapidly took on healthy action, and the general condition of the patient became as favorable as could be desired. On the 24th, after passing a good night, he complained of a feeling of "soreness" in the right *iliac* fossa. Very little if any tenderness on pressure was experienced there, but some enlarged glands were felt in the locality, and the uneasiness was referred to them by the patient, rather than to a position more deep seated. The discharge on this day was, as it had been, thick and healthy. The wound on the whole was, healthy, the bottom of it however was still foul, though fast cleaning, each day granulations springing up. The same feeling of soreness and stiffness was casually mentioned by the patient, as being experienced down the adductors and the muscles of the leg. No swelling of the limb. The temperature had continued good, but no pulsation in the tibial arteries could be discovered then, or subsequently, up to the date of the man's death—the heat however

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