gulated hernia, is not to boast of its success, nor yet to recommend the practice on all occasions, but merely to prove that wounds of the intestines are not so fatal as they are generally said to be, and that a surgeon should never be devoid of resources, nor hand over to certain death, cases, that might be saved by a bold but judicious departure from general rules. It seemed to me, that I was placed on the horns of a dilemma. To have dilated the ring, I would almost say the abdominal parietes, sufficiently for admitting of the easy return of the bowel, enormously distended as it was, would have exposed the epigastric artery to injury, and might have induced peritoneal inflammation; and, on the other hand, to have used as much force as required to return the bowel, would have certainly exposed it to tear or burst, being very tender, and almost black, and, therefore, I had no other resource but emptying the bowel.

On some future occasion I may communicate the particulars of a recent and fatal case of Inguinal Hernia, that had been repeatedly strangulated, but when returned, there remained a fullness in the canal that denoted the pressure of something unusual, most probably of the sac, much thickened and firmly attached to the part. Upon operating, this proved to be the case. On the fourth day the operation was reluctantly submitted to, and as reluctantly performed, and that as a "forlorn hope," seeing there were great pain, tenderness and tension of the abdomen, attended with vomiting and hiccup, and other marks of approaching, if not of actual, gangrene; the superincumbent parts adhered firmly to the sac, and this to the intestine, the whole forming, as it were, one homogenous mass. On attempting, with the utmost caution, to separate the parts, the bowel was slightly punctured, on which a little gas escaped. The bowel was quite black and of a dull hue. Notwithstanding every effort it was advisable to make, complete reduction could not be obtained, in consequence of the adhesions. The patient, however, felt easier for a short time; but the hiccup continued, and all the symptoms denoted mortification, and, forty hours after the operation, he died. No persuasion could induce the friends to permit a post mortem examination.