

belladonnæ we should derive the benefits from the local application of that drug, together with the advantages of the diachylon treatment, at one and the same time. Constitutional means and the ordinary astringent lotions are useless in these cases of partial sweating."

"A Member" should consult Ringer's Therapeutics on the subject. He will find it recommended to apply the liniment of belladonna to the hands, or a solution of atropine. An ointment containing belladonna liniment may be used with gloves at night, or a small quantity of atropine (which is more decided) may be injected under the skin. If these fail, the hands should be wrapped up at night in Hebra's lead ointment, and nerve tonics given. A strong solution of tannin in alcohol is a remedy worth trying. The atropine should be injected into the arm. One hundred and twentieth of a grain is sufficient to begin with. If the malady continue, the ninetieth and subsequently the sixtieth of a grain may be used. Every second or third day is frequent enough to inject.

A CLINICAL LECTURE.

Delivered at Jefferson Medical College Hospital by SAMUEL W. Gross, M.D., Lecturer on Disease of the Genito-Urinary Passages and on Clinical Surgery in Jefferson Medical School, Philadelphia (Reported for the *N. Y. Hospital Gazette*.)

EXTERNAL HEMORRHOID.

This is a trouble for which you will be very frequently consulted. You notice this little tumor on the verge of the anus. It is characteristic in appearance, and is the cause of great pain. The man first noticed its presence yesterday afternoon following a passage accompanied by a good deal of straining. The tumor is uncommonly large for a pile. It is of the usual bluish color, and imparts a decided sense of tightness to the touch.

Hæmorrhoid tumors are of two kinds, external and internal. The internal pile is within the sphincter ani muscle, and consists of a knot of hypertrophied arteries and veins. It is commonly soft and spongy in texture. The external hæmorrhoid is of a very different character. It is external to the sphincter ani muscle, but is very often strangulated by the contraction of that muscle. It consists of an extravasation of blood from the hæmorrhoidal vessels, is, in fact, a sort of apoplexy at the verge of the anus.

As regards the treatment of an external hæmorrhoid, Erichsen of London, and Bryant of Guy's Hospital, advise its immediate removal with a knife. This is a truly villainous practice, and attended with great risk of obstinate hæmorrhage. The American surgeon incises the tumor with a bistoury, and presses out its contents, i.e., the contained clot of blood. The structure of an external hæmorrhoid consists

entirely of this clot of blood. The slight operation relieves the pain and tension at once. As an after-treatment the parts should be well bathed with cold water and some medicine given to act on the liver and bowels. [The above remarks were made by Prof. S. D. Gross, who had taken his son's place for a few minutes.—REPORTER.]

NÆVUS MATERNA.

You notice this soft, elastic tumor over the upper portion of the left frontal bone. It is as large as an almond, and is traversed by veins. When the child cries the tumor grows hard and tense. This is what is vulgarly known as a mother's mark, a *nævus materna*. These tumors are called cavernous *angiomæ* and consist of dilated veins, or arteries, or both—sometimes the veins predominate, sometimes the arteries. These veins and arteries are, of course, of capillary size.

There are a great many ways of operating in a case like this. In a recent instance I tried to cut away the growth under the skin so as to avoid a bad-looking scar, but I found it of no use. On another occasion I tried cauterization, heating the bulb of the cautery and perforating the tumor in many places, but it did no real good.

The proper way to treat such cases is the one which I shall now adopt. I push two oiled pins right through the base of the growth so that they cross each other at right angles. I then take a sharp knife and cut a groove in the skin between the points of insertion and of exit of the two pins, and then pass a stout ligature round the base of the *nævus* and underneath the pins. I draw this ligature just as tight as I possibly can, so as to completely strangle the growth. When this is done the vessels of the tumor are obliterated, new matter is thrown out, and the tumor itself sloughs off in the course of four or five days, leaving an open, granulating wound, which must be protected by some mild ointment. Before dismissing the case I cut off the ends of the pins so that they will not catch in the clothing. There is no use whatever in temporizing in these cases by the use of the cautery, or by the injection of irritating substances in the body of the tumor.

MAGIC EFFECTS OF HYPODERMIC PUNCTURE OF MORPHIA IN CASES OF DYSENTERY.

By J. E. WASHINGTON M.D., Augusta, Ga.

As I have never seen mention made of the use of morphine by hypodermic puncture in cases of dysentery, I have concluded to give my own experience with it. I was first induced to try it by being called to a case in which there was terrible suffering from tenesmus and vomiting. In this case the man begged me, "Doctor, for God's sake give me som