

or materials, or as an internal remedy, that the minds of many medical men have been turned against it, either from the want of a careful and sufficient trial of the remedy for themselves or, what is more frequently the case, from the ridiculous exhibitions which they may have witnessed in some few of the operating theatres in the old country. The plain, simple and common-sense use of the drug as manifested in the following selected cases may be interesting to those who have been nauseated by one of the exhibitions alluded to above.

*Case 1.*—A volunteer, age 45, stout and healthy, while trying to wrench a rifle from one of his comrades, received a bayonet wound of the knee joint, the point passing under the patella from above downwards. He was brought by boat from Battersea Park to the hospital. There was slight bleeding with a considerable escape of synovial fluid. The limb was fixed on a back splint with a foot-piece, and the wound was covered with a pad of lint soaked in a solution of carbolic acid. The man was very feverish for a few days, and delirious for about 24 hours, but after that the pain and swelling gradually subsided, and in three weeks the man walked out of the hospital.

*Case 2.*—A boy, about eight years of age, was found by a policeman sitting on one of the steps leading to the Thames embankment, holding his knee. The policeman brought him to the hospital, when it was found that he had in some unaccountable way received a deep, clean cut, shaving the upper border of the patella. He could give no explanation of how he met with the accident. The edges of the wound were brought together with silver sutures, and a pad of lint soaked in a solution of carbolic acid was applied. In a fortnight the boy was quite recovered.

*Case 3.*—A girl, ten years of age, was knocked down by a passing cart. She received several bruises, but the chief injury was on the inner side of the knee-joint, where there was an opening, the size of a penny, grimed with dirt, caused by the knee being bruised against the pavement. The leg was bandaged to a back splint, and the wound, from which it was impossible to wash the dirt, was covered with three or four folds of lint soaked in a solution of carbolic acid, and kept constantly moist with a similar solution by the following means: a bottle containing the solution was fastened to the top bar of a cradle, and hanging from it was a narrow strip of lint, from which drop by drop the solution fell over the lint covering the wound. For six weeks the dressing was not touched. There was an immense amount of discharge which

worked its way from under the lint, but the child's general health continued remarkably good throughout, although the smell was very offensive. At the end of that time, the dressing and splints were removed, and the wound found to be quite healed. The child moved about on crutches for a few days, and then left the hospital as well as ever.

*Case 4.*—A farmer's boy, age 18, amusing himself with a gun, allowed it to burst in his hand. The result was the palm of one hand was split and torn in every direction, and the fingers were cleaned to the bone. The hand was bound up in lint soaked in a solution of carbolic acid, and bandaged to a splint. Opium was given in large doses and frequently to ease pain, and in a month he had recovered, the distal phalanges only being lost.

*Case 5.*—A boy, age 11, the son of a railway guard at Clapham Junction, in attempting to jump on a carriage in motion, fell and had his left foot crushed. All the bones with the exception of the calcis and astragalus, were either fractured or displaced. The surgeon under whose care he was placed decided to try what nature aided by carbolic acid would do for the boy, for the reason that, if any operation had been performed it would have been amputation of the leg, as the soft parts were so badly bruised as to render any operation of the foot or ankle impossible. The foot was covered with lint, and kept constantly moist in the manner referred to above. All the phalanges and all the metatarsal bones except that of the great toe gradually became separated from the healthy tissues, and came away. The parts then rapidly healed, and at the end of two months the boy left the hospital with a very useful foot.

*Case 6.*—A carpenter, age 47, thin and delicate, working at the London and Westminster Bank, feeling the platform under him giving way jumped backwards to the street, a distance of at least twelve feet. He was unable to rise, so his master brought him to the hospital. On examining his right foot, the astragalus was found to be dislocated forward and a little outward and turned upside down, the lower part being slightly fractured. There was no wound of the skin, but the parts were so tense and the bone so completely out of place that the surgeon decided to remove it, which he did at once and every easily by a single incision over the bone. The edges of the wound were brought together with wire sutures, the limb was bandaged to a back splint with foot-piece, side splints being afterwards applied to render it more secure as he was a very nervous, fidgety man, and a solution of carbolic acid was kept constantly drip-