

The gum quickly assumed a healthy appearance, and the boy was much relieved. He attended as an out-patient at the Queen's Hospital: but not getting much better as to the nasal symptoms, on November 13th I made another examination of the patient, when an oval calculus, weighing twenty grains, was discovered by a probe, and removed with dressing forceps in two pieces from the right nostril. It was half an inch in length, and a quarter of an inch in breadth, and was composed of phosphate of lime and magnesia concreted around a pebble the size of a large pea. The punctum lachrymale on that side was so closed that no tears could pass into the nostril. I therefore deemed it necessary to slit it up, and to pass an Anel's probe down the nasal duct.

On November 20th the nose was much less swollen; the discharge diminished, and the tears were passing naturally into the nose. The lachrymal probe was again used. No caries of bone has taken place. The nose is nearly of its proper proportions, and the boy is quite well.—*Lancet*.

BIRMINGHAM, January, 1872.

CASES OF STRANGULATED HERNIA.

Under the care of J. FAYRER, M.D., C.S.I.

CASE I.—Modun Mohun, a Hindoo sircar, aged 45, was admitted on the 15th May, 1871, with symptoms of strangulated oblique, inguino-scrotal hernia on the right side. The hernia was of four years' duration, but had hitherto been reducible, and the present symptoms, pain in the tumour, which was very large, and in the umbilical region, constipation and constant vomiting, had set in about two hours before admission. His pulse was weak and depressed. The usual measures, chloroform and taxis, &c., having failed, the operation for strangulated hernia was performed without further delay. The stricture was found to be at the external ring; it was divided, without opening the sac, and the hernia reduced. The wound was antiseptically dressed, healed rapidly, and he was discharged, cured, on 29th June, 1871.

CASE II.—Mohesh Chunder Bose, a Bengalli, aged 55, a broker, was admitted on the 13th September, 1871, with symptoms of strangulated oblique, inguino scrotal hernia on the right side. The hernia was of fifteen years duration, had once been strangulated before, but was reduced by taxis. The symptoms, vomiting and constipation, had been present for some time. All the ordinary measures for reduction having failed, the operation was per-