

During a period of 4 or 5 weeks, every attempt at discussing it was made, but attended with no beneficial results. At the end of that time, I proposed its removal by the knife, to which Stewart readily consented. The sight of the instruments, however, weakened his resolution, and he left promising to return on the following day. I saw nothing of him until the 5th March. During the interim, the tumour had increased to twice its size, was more painful, and what was to him a source of much grief apparently, he thought it looked "unco bad." He was now eager for its removal: With the assistance of my friend Dr. Wright, I commenced the operation by carrying an incision of about 1½ inches in length along the base of the left side of lower jaw, commencing at the angle.* The platysma, superficial and deep fasciæ were divided and the tumour exposed. It was found to be bound down on all sides, by condensed areolar tissue which yielded only to the edge of the knife. This made the dissection more hazardous. The facial artery was tied and cut; facial vein also was divided. Hæmorrhage from the latter and from some other small venous branches was profuse, and greatly impeded our dissection, but by firm traction, downwards and forwards, it was isolated by the knife from its deep attachment. The edges of the wound were then brought carefully together, and union by second intention took place in seven days.

It is now nearly eighteen months since the operation was performed, and the patient tells me he experiences no inconvenience whatever. A white seam alone indicates the former situation of the wound.

The tumour (which was about the size of a walnut,) was of a whitish colour, and very hard, creaking under knife like cartilage. A section of it showed it to be made up of concentric layers, having in their centre a nucleus of pus.

ART. XII.—*Iodine as an Ectrotic in Small Pox.* By JAS. CRAWFORD, M.D., Prof. Clinical Medicine, McGill College.

To the Editors of the Montreal Medical Chronicle.

GENTLEMEN,

Having read in one of your "Exchanges," [(the Glasgow Medical Journal,) an article by Dr. J. Wallace, "on some of the means recently proposed, for the prevention of pitting in small pox," and remarking that he says, in offering his opinion, of the comparative merits of the

* Pancoast and Velpeau recommended a second incision from the posterior of the first to the os hyoides. But finding that the tumour could be exposed by a single incision, at the suggestion of Dr. Wright, I was induced to adopt this plan.