informed me that she was acquainted with the individuals, a man and woman, both of whom died: and they neglected to apply for relief till the disease had proceeded so far that nothing could be done.

Many object to the use of the ecraseur on account, as they say, of its not making a very surgical looking operation, but in such cases as the above I consider it has decided advantages over other means, and its chief value consists in its not incurring any risk of the free hemorrhage which often attends the use of the knife, while compared with the ligature it entails little or no suppuration, and you obtain your object at once. When operating, the person should be kept as steady as possible, since any sudden movement might cause the chain to tear the part, and thus give rise to bleeding, at least a full minute is necessary between each movement of the instrument. The ligature that isolates or that may pass through the tumor must be kept free of the chain, as at the close of the operation it may cause delay by preventing the divided part dropping off. Dr. McCallum has given a full description of the instrument, accompanied by a wood-cut, in the December number, Vol. V., of the Chronicle. He was, I believe, the first to operate with it in Canada, and I am indebted to his kindness for its use on this occasion,

Monireal, May, 1858.

ART. II.—Treatment of Varicose Veins by means of Needles and Ligatures, by J. C. Butler, M.D., Waterloo, Shefford Co., C. E.

The first of January last, Mr. Frederick Chambers, of the Township of Stanbridge, C. E., having Scrofulous diathesis, consulted me in reference to varicose veins of the left leg. Mr. C—— is about 28 years of age; he is a tall man of phlegmatic appearance.

The saphena veins, from the foot to a point near the saphenous open ing, were completely obliterated by means of an operation made by me, August 2, 1852, and reported in the February number of the "Canada Medical Journal 1853."

The remains of the saphena vein could be distinctly traced from the ankle to the saphenous opening, which fact was evidence of the complete and successful obliteration of the original trunk and its branches. A collateral venous circulation had been established, which, at the time when last consulted, exhibited a very diseased condition. I advised an operation upon it similar to the one referred to above; which operation I performed the 7th January past, assisted by one of my students, by introducing five common brass pins behind the veins, and applying strong silk ligatures, waxed, and drawing them tightly around the ax-