

inch above Poupart's ligament downwards and forwards on the thigh. Arterial thrill and pulsation are felt very distinctly over its whole surface, and nearly as far outward as the anterior superior spinous process. On placing the stethoscope over any part of the tumor a loud blowing murmur is heard, and may be traced for some distance in the course of the vessel both above and below. The heart's sounds are normal. All pulsation ceases and the tumor becomes perfectly flaccid on making firm pressure in the course of the external iliac. The pulse on the distal side of the vessel is weakened, and in the popliteal cannot be felt, though it is distinct enough on the healthy side. His general health is as good as usual; and as treatment by continuous pressure is practically impossible, and danger of the sac bursting appears imminent, deligation of the external iliac was resolved upon.

Wednesday, March 30th. The bowels having been previously well evacuated with a dose of castor oil, and the pubes shaved, the man was placed on the operating table on his back, the shoulders raised and legs extended, and put thoroughly under the influence of chloroform. A curved incision, five inches in length, was then carried through the integument from a point an inch to the inner side and a little above the anterior superior spine of the ilium to about the inner third of Poupart's ligament. The superficial fascia and abdominal muscles were cautiously divided, to the same extent, and the transversalis fascia being exposed, a small portion was pinched up by forceps, and an opening made at the upper angle of the wound: a director was then gently insinuated, and the fascia divided the whole length of the wound. The peritoneum was exposed without having sustained the slightest injury, and was gently detached by the fingers to a sufficient extent, and held to the inner side by means of a broad copper spatula. The sac of the aneurism could now be felt pulsating with so much violence that some fears were entertained it might give way. It was also found that the sac extended somewhat higher than had been anticipated from the external examination. The fascia covering the vessels was next scratched through with a scalpel, having its edge and point previously blunted, and the sheath of the vessel being exposed and opened by raising a fold with forceps, and scratching it through with the blunt pointed scalpel, an aneurism needle was passed without any difficulty between the vein and artery from within outwards. A very small opening was made in the sheath, and only enough detached to allow of the needle being passed. Having satisfied himself that the ligature controlled the vessel completely and included nothing else, the operator then tied it firmly. All trace of pulsation in the tumor ceased immediately. The wound was closed with silver sutures and adhesive