

accident:—He stated that he was riding on horseback and returning home; his horse shied and bounded suddenly to the other side of the road; he lost his stirrups and was nearly thrown; he however partially recovered his seat, and perceiving that the horse was galloping towards a dangerous bridge, he pulled him in suddenly and he was thrown with great violence on the pommel of the saddle. He said that he heard a loud crack, and felt something warm and scalding instantly diffused over the lower part of the abdomen; he still retained his seat, but finding himself unable to proceed he alighted at a house close by; he walked into the house unsupported, and after remaining there an hour returned home in a sleigh. Said that he received the blow on the perineum anterior to the anus. Is 42 years of age, very muscular and a mason by trade. His countenance was pale and anxious; pulse rapid and very feeble; lower part of abdomen hard and very painful on pressure; penis scrotum and perineum swelled and livid; motions of the trunk and limbs painful, and complains of great pain in lower part of back and loins, particularly on the left side; could not remember when he had last emptied the bladder, and felt no desire to do so at that time. I ordered cooling applications to the parts affected, which he thought gave him relief; I also administered three grains of opium.

19th.—Returned at 9 a.m.; my patient was not suffering so much pain, and had slept occasionally; swelling every where much increased; abdomen very hard and painful on pressure; pulse 100 weak; countenance more natural; had not micturated and had but little inclination; I introduced a catheter without difficulty, and about two ounces of a dark colored grumous fluid came away, which was partly composed of blood. I remained two or three hours and again introduced the catheter, when about the same quantity of a lighter colored fluid was discharged. I was now obliged to leave, but left the catheter in charge of an intelligent person, with orders to introduce it every three or four hours. I made an incision into the penis which discharged bloody fluid; I ordered the cold applications to be continued and left some opium powders, one to be given every six hours.

20th.—Returned at 9 a.m. I found my patient comparatively easy, but countenance much changed. Had rested well during night. The penis, scrotum and perineum were now enormously distended, and very livid. I made several free scarifications, from which bloody serous fluid was copiously discharged. The catheter had been used several times, but never more than two ounces could be obtained at a time.

No evacuations from the bowels having as yet been

obtained, I administered a large enema, but without effect. The patient being unable, from the pain in his abdomen, to exert the slightest pressure. I may here mention that he always retained the power and sensibility of his limbs. I again introduced the catheter and withdrew, as usual, two ounces of natural urine. I remained in attendance four hours, and left the catheter in the urethra. The anodynes and cold applications still continued.

21st.—Visited my patient at 11 a.m. Found him rapidly sinking, but quite sensible; pulse scarcely perceptible. Has little pain; abdomen very livid, much softer, and has little tenderness; sensation in other parts nearly gone, scarifications having discharged very freely; catheter was removed about 6 a.m., as it had ceased to discharge fluid; I introduced it but nothing came away. Had slept soundly for a considerable period. He continued easy all day, and very tranquil; and expired about 11 p.m.

Post Mortem Examination.—On the 22d, about 16 hours after death, with much difficulty I succeeded in obtaining leave to make only a partial examination. I introduced a bougie into the urethra, and raised a triangular flap, the base at the pubis. On cutting into the soft parts, a considerable discharge of bloody serous fluid took place; after lifting up the flap, I discovered that the ossa pubis were separated at the symphysis about half an inch, and that a laceration about two inches long had taken place in the bladder and urethra. I made no further examination. The laceration in the urethra and the bladder I expected to find, and at the first, gave an unfavorable prognosis, formed on the certainty that such a laceration had occurred; but the rupture of the symphysis I had never thought of, and was much surprised when I made the discovery. Mr. Arthur was fully convinced that he received the blow on the perineum, and it is probable that the pommel of the saddle struck him side ways, on the left ischium from within, outwards. You are better able to judge than I am, whether or not such an apparently trifling cause could produce such severe injury.

ART. LXII.—AN ANOMALOUS CASE OF INVOLUNTARY MOVEMENT OF THE HEAD AND NECK, WITH OBSERVATIONS.

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On the evening of the 13th April, 1848, I was summoned to visit Miss ——— without delay; having done