## SURGICAL HINTS.

When an extremity has to be rather firmly bandaged, it is a good plan to leave out the very tips of the fingers and toes so that they may be frequently examined in order to see that the constriction is not too great.

Never forget the fact that gauze will drain serum or very fluid discharges, but not pus. Hence the filling up of an abscess cavity with gauze is the surest possible way of blocking in the secretion and favoring sepsis.

It has been cleverly stated that "to say that a man with appendicitis has been cured by medical means is in many cases' equivalent to saying that a man with stone in his bladder has recovered from calculus after the cure of a cystitis by rest in bed."

In blows upon the perineum it is well to remember that infiltration of urine may occur even when there have been no recognizable symptoms of laceration of the urethra, and that it should be watched for. Hematomata in this region must be kept under careful observation, and should be opened and disinfected if there is the slightest indication of sepsis.

In wounds of the liver packing with gauze is usually insufficient to stop hemorrhage, because the packing pushes the liver out of place so that no pressure can be maintained. If the wound is a small one it should be sutured or cauterized with the actual cautery. If it is large the liver should be sewn to the abdominal wall and the wound then packed with gauze.

In very severe dyspnea general anesthesia is usually contraindicated, for the reason that it abolishes the activity of the voluntary muscles of respiration, and hence may cause suffocation. In these cases the carbonic acid poisoning is often sufficient to lessen sensibility to a great extent, so that rapid operations can be done with very little pain. Otherwise local anesthesia should be employed.

Furuncles occurring on the back of the neck are in many instances the result of an inflammation around the hair follicles, or perifolliculitis. Early extraction of the hair and application of cotton and collodion are often sufficient to prevent the development of a large boil.—Inter. Jour. Surgery.