

course of the Peninsular War, and the Nepaulese War in India, I have seen and treated many such cases, of which reports were forwarded to the proper authorities at the time. After a lapse of 35 years, or thereabouts, it is, impossible to recollect them with distinctness; but my impression is that the presence of emphysema was considered a subordinate matter, and little regarded. It was even supposed, that when air thus found its way to the surface, there was less risk of hæmorrhage and internal inflammation.

In these cases, friction and stimulating unctuous applications were employed, and when the emphysema was extensive, and the skin tense, scarifications were attended with much benefit.

Of one case I retain a vivid recollection, because the patient was a friend and brother officer. He was wounded in one of the actions in the Pyrenees in July, 1813, by a musket ball, which passed deeply into the right lung and there remained. There was profuse hæmorrhage from the mouth immediately, with dreadful dyspnœa, and extensive emphysema over the upper part of the body. For the first three days he was in a most dangerous state, half suffocated, and only kept alive by frequent bleedings. During this time he lost more than two hundred ounces of blood, besides from the hæmorrhage.

My patient is now a General officer, residing in the south of England, in good health. He still carries the ball in his chest, where it has become encysted, nature having made a nest for it and the bits of cloth it carried in. It appears to rest upon the diaphragm, and the only inconvenience experienced from its presence is when sudden or violent bodily exertion is made; then alarming phrenic spasms occur. On this account the General, who was always fond of riding, although he still mounts his horse, cannot canter nor trot with any comfort.

A case of emphysema from broken ribs, very remarkable on account of the attending circumstances, occurred in Quebec in 1836. A soldier of the 66th Regiment, named Ramsay, was sitting on the outer edge of the rampart of the Citadel, gazing at the first spring ships coming round Point Levy. The place where he sat was immediately above the precipice, rising from the Lower Town, where there was no ditch nor glacis. By some carelessness he lost his balance and fell, first to the foot of the rampart, thirty-five feet, and then tumbled from rock to rock three hundred feet more, until he alighted on the roof of a house in Champlain Street.

I was then Surgeon of the 66th, and hastened to see the poor fellow. He was alive, but pulseless and insensible, and apparently dying. There were many bad cuts and lacerations over the body, from which the blood was still issuing; the chest and back were swollen and emphysematous, through which I could perceive the crepitus of broken ribs, though I