

of breathing; it seemed to have descended rather by its own superior weight, and become fast in some bronchial tube. But, lest there might be some mistake in the opinion we had formed and expressed—viz., that the pipe stem was in the trachea or bronchiæ, we resorted to other means than an immediate incision, to dislodge the offending cause. A probang was several times introduced into the pharynx and œsophagus. An emetic of sang : canaden : was administered with the vain hope that the body might be coughed up in the operation. And, to the horrid proposal of cutting the boy's throat to save his life, the friends hesitated much in yielding consent, and they were induced to try still further milder means to expel the foreign body before they would consent to this savage operation. Consequently we left the patient for the night; in the meantime the lad was several times held up by his ankles with his head downwards, at the same time applying sudden percussion between the shoulders, but all to no purpose.

“The next morning, about 18 hours from the accident, consent was obtained for the operation. This was performed by placing the boy upon a table on his back, his head, arms, and legs, were held and supported by assistants. The lad being short necked and fat, it became expedient to introduce a bolster beneath the nape of the neck and shoulders, so as to bear the head back and raise the trachea, to make room for the knife. These preliminaries being settled, I commenced the incision from above and carried it longitudinally downwards, in the course of the trachea to the sternum. While cutting through the adipose substance a vein of considerable size was divided; this continued to bleed for some time, and to save time we applied a ligature. The tracheal opening was now made at the upper angle of the incision, when the air and spray burst forcibly out; the boy, up to this time incessantly screaming and inquiring if we found the pipe stem—but now his voice was, as it were, smothered and gone. At this critical juncture he was turned on his left side to prevent the oozing of the blood into the trachea, and the incision was finished by dividing the tracheal rings, with the probe pointed bistory, to the extent of the external incision, it being about $2\frac{1}{2}$ inches. The cut edges of the trachea were drawn apart with broad blunt hooks, made of silver plate, and immediate search was made for the foreign body.

“After nearly ten minutes search it was found by Dr. Marsh, and drawn out on the point of the probe, this having entered the hollow