

its reception. Capillary tubes have also been used for paracentesis abdominis and thoracis by Dr. Goodhart, of Guy's Hospital.

The subject of metalloscopy and metallotherapy has engaged the attention of scientific physicians, in the treatment of hystero-epilepsy, in which anæsthesia or hemianæsthesia are frequent symptoms. It consists in the application of certain metals varying according to the idiosyncrasy of the patient, the process of ascertaining which is called metalloscopy. Bits of metal are applied to some part of the surface on the anæsthetic side. A piece of metal is also introduced into the mouth or applied over the mastoid process. If the proper metal has been hit upon, the sensibility is restored wholly or in part, if not, another and another kind of metal is tried until the proper one is ascertained which is then kept applied, or some salt of the metal administered. The metal is supposed to act by creating a current of electricity which effects the vaso-motor nerves, so that an increased blood-supply is sent to the parts.

The direct method of artificial respiration introduced and practised by Dr. Benjamin Howard has been on its trial during the past year. The claims of superiority over Marshall Hall's or Sylvester's method, are its simplicity and the readiness with which it can be employed by water police and others who may have once seen it put in practice.

A fearful epidemic of yellow fever occurred in the Southern States of America during the summer and autumn, resulting in great loss of life. The epidemic broke out in July and continued up to the month of November. It commenced in New Orleans and spread with great rapidity to Memphis, Vicksburg, Mobile, Grenada, Key West and other places. In New Orleans alone, up to Oct. 12th, there were 11,206 cases and 3,400 deaths, showing a mortality of more than 20 per cent. This awful list of deaths has rarely ever been equaled, and scarcely surpassed in the annals of famine and war. Many medical men, ever faithful in the discharge of their noble calling and unwilling to desert the unfortunate victims, although the people were fleeing in all directions, fell like heroes at their posts. An outbreak of contagious pneumonia in certain parts of England during the past year has renewed the discussion on this important subject. It is supposed to be a *pythogenic* pneumonia, and is infective. It has some resemblance to the pleuro-pneumonia of cattle.

In the domain of surgery much has been accomplished, and several new and important procedures have been introduced into practice. A new departure in the operation of lithotripsy has been brought forward by Dr. Bigelow, of Boston. Instead of short and repeated operations, he recommends longer time and an attempt to break up the stone, and wash it all away by a contrivance for the purpose, if possible at a single operation. Thus far, the success of the prolonged operation has been very good. An improvement has also been introduced in the operation for removal of the tongue in cancer, by Dr. Shrady, of New York. It consists, first, in ligaturing the lingual arteries at the posterior border of the hyo-glossus muscle, after which the removal of the tongue, it is claimed, is almost perfectly bloodless.

The results obtained with the catgut ligature have been conflicting. Some surgeons have found it uniformly effectual and safe, others have met with only disappointment and disaster. It is liable to soften and the knot to unloose, and thus permit of secondary hemorrhage. The use of the elastic ligature for the division of the prepuce in the treatment of phimosis has been tested in several cases, and with very good results. It is applicable in a number of cases where circumcision or the use of the knife is inadmissible.

The operation for the removal of the lower end of the rectum for the relief of cancer, has been several times performed during the year, and quite recently by Dr. Fenwick of Montreal. The success which has attended the operation so far, is such as to encourage a repetition in certain cases where there is reason to believe that the disease can be surrounded and completely removed by the knife. The control of the bowel afterwards is wonderfully good considering the nature of the operation, and in those cases in which the sphincter action is impaired or lost, the patient still retains the sensation of the presence of feces, and can make preparations for cleanliness.

Another case of removal of the spleen, has been put upon record by Dr. Browne of the Bromwich Hospital. The tumor which proved to be a simple hypertrophy, weighed 18½ pounds. There was no hemorrhage. Four large arteries required the ligature. The patient, previously very much reduced—in an almost hopeless condition—died five hours after the operation. The treatment of