

cial changes in the economy and management of every class of establishments in the province."

Happily this important subject has engaged the attention of the present administration, and convinced, as every right-minded man must be, that the prosperity of the province, and the happiness of its people, are, with its members, considerations which supersede all others; we may rest assured that nothing will be wanting on their part, to render our public institutions as efficient in all their acquirements, as their great importance and usefulness, now so urgently and so justly demand from a government of liberal and progressive views.

Quebec, April, 1857.

ART. XXXV.—*Punctured Wound of Pleura Costalis; Extensive Pleuritic Effusion, Recovery.* By J. A. GRANT, M.D., Ottawa.

Few have better opportunities of ascertaining the deleterious influences accruing from the immoderate use of alcoholic liquors, than the practitioner in his callings throughout the various classes of society, and few, if any, can exert a more beneficial effect upon the inebriate wherever observed. The daily journals teem with instances of crime perpetrated when the reason has been supplanted by this potentate, and man thus forced to violate those laws which blend society harmoniously throughout its numerous circles. The following is a peculiarly fortunate and interesting example:—

October 20, 1856, L. M., æt 24, a carter, of middle stature, in a drunken affray, received several wounds, inflicted with a sharp pointed instrument, one of which constitutes the case in question. About an hour afterwards I was present. On examining his person the following external injury presented:—*Right side*, a small clean wound opposite fourth intercostal space, below and one inch to the right of nipple. On probing the wound it was found to pass obliquely upwards and inwards to second intercostal space. At this period no positive proof of thoracic puncture existed—still from what follows, it will be observed that the instrument entered the right pleural cavity, opposite second intercostal space—piercing only pleura costalis and escaping intercostal artery. The existing freedom of respiration, composure of features and absence of any bloody expectoration favored the opinion of above pleural injury. Having carefully examined the wounds, covered external opening with tepid water dressing, retained in situ by light bandaging,