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Winnipeg, January, 1890.

HOSPITAL REPORTS.

CASES TREATED AT THE WINNIPEG GENERAL HOSPITAL DURING THE MONTH OF DECEMBER.

Under the care of Dr. A. H. FREGUSON, Professor of Surgery in Manitona Modical College,

Reported by Dr. J. G. Calder, House Surgeon to the Hospital.

Compound Communited Fracture of Frontal Bone with Depression — RECOVERY.

Willie T——, age 12, was kicked in the forehead by a horse about noon on Nov. 7th, admitted to hospital about an hour afterwards, in a semi-comatose condition. A large blood tumor found covering the whole forehead, there being two small wounds, one three inches above and a little to the outer side of the right eye, the other two inches above the outer angle of the left eye. Examination reveals crepitus over the whole forehead, and on pressing close to opening over left eye brain matter oozed out.

Operation.—Patient was given an anneesthetic and the two openings were connected by an incision down to the bone,
and the clot turned out. This incision
revealed a depressed fracture of the whole
forehead. To facilitate matters the incision
was carried upwards and outwards from the
left extremity of the wound for a distance
of about two inches, and downwards and
outwards from the right extremity of the
wound for acout two and a half inches,
thus making a N shaped incision with
two triangular flaps, one of which was
reflected up and the other down.

On laying bare the bone those portions beneath the small original wounds were found to be seat of stellate fractures, and on pressing the cones gently brain substance cozed from both points.

Four complete fractures were found across the forehead, the upper of which was arched upwards, one crack extended around the head to the left, another around to the right for an unascertained distance, there was also one fracture extending down into each orbit, and one running down past the outer angle of the left orbit, the whole frontal bone being depressed and driven in under the vault of the cranium for a distance of about three fourths of an inch.

The small shattered fragments at the corners were picked out, three sharp projecting corners were sawn off to facilitate elevation and the bone was drawn downwards and outwards from beneath the vault of the cranium and elevated; holes were drilled through the pieces and three silver wire and two catgut sutures put in; one piece about two inches long and one inch broad was almost completely separated, the two catgut sutures being used to keep it in place.

The whole was closed by a continuous suture, two of Macewen's decalcified chicken bone drains, each about two and a half inches long were inserted and stiched into place, their ends opening at the points of the original wounds, but not projecting beyond the skin, an abundance of antiseptic gauze was put on, covering the whole top of the head, ears and eyes and kept in place by gauze and starch bandages.

On being put to bed, temperature was 99.2. Respiration, 37; pulse, 100; very delirious, moaning, crying out; some vomiting and twitching of the muscles. The pulse, respiration and rectal temperature were taken every hour. Seven hours after the operation the rectal temperature rose to 100.8, which was the highest reached.

First day.—Morning temperature normal, pulse 106, respiration 26. Evening temperature 1004, still delirious and moaning, complains of weight and compression of head.

Third day. — Morning and evening temperature normal, not so delirious but still complains of pain in the head, pulse 86, respiration 18.