

healthy and vigorous man, and likely to bear the operation well. The recent increase in the swelling, attended as it was with severe pain and rapid deterioration of vision, threatened irreparable damage to sight unless some speedy means of relief could be obtained. The man himself was exceedingly averse to any form of treatment that did not promise an immediate cure.

On the following day, May 25th, Dr. Shepherd ligated the common carotid in the upper part of its course, with the usual antiseptic precautions. Two ligatures were placed around the artery and the vessel severed between them. The edges of the wound were brought together over a decalcified bone drainage-tube and an antiseptic dressing applied. The immediate effect of the operation on the orbital tumor was the same as had been temporarily obtained by digital compression, only somewhat greater—i.e., softening of the swelling, partial reposition of the eye, great diminution in the pulsation, and total cessation of the bruit. Recovery from the anæsthetic (ether) was perfectly normal, without the slightest sign of impairment in the cerebral or nervous functions.

*May 26th.*—Proptosis greatly diminished, the conjunctival œdema has nearly disappeared, vision greatly improved, and the voluntary movements of the eyeball are tolerably free. There is no diplopia, and the patient feels perfectly comfortable.

*27th.*—Uninterrupted improvement.

*28th.*—Feels quite well and “can see nicely” with the affected eye. V.  $\frac{3}{8}$ . States that since the operation there has been no noise in the ear. Proptosis now only slight in degree.

*June 4th.*—Dressings removed from the neck to-day; the wound found to be completely healed and the bone drainage-tube entirely absorbed. Can see as well as ever. V.  $\frac{3}{8}$ . Movements of the eyeball appear to be entirely normal; the globe, however, is still somewhat displaced forwards.

*June 12th.*—Patient thinks himself cured and declines to remain longer in hospital. Beyond a slight fullness of the orbit there is no indication of the recent orbital affection.

*Compound Dislocation of the Astragalus.*—DR. HINGSTON reported a case of dislocation of the astragalus, in which the