

lapse. This has been told me by Mr. Wood himself, as well as by others who have frequently performed his operation. Besides, it is probable that the removal of the wire suture in my case helped to admit of the formation of another hernia. I had intended to leave the wire in the parts permanently, but suppuration having occurred, I feared lest it might not remain there quietly and therefore I removed it. It is very probable, also, that this operation of sewing up the hernial opening will prove more successful in obtaining a radical cure in cases of *inguinal* hernia, as the sides of the inguinal ring afford a better hold to the suture; and furthermore, there is more cellular tissue about it to aid by its thickening in closing the aperture. For these reasons Wood's operation proves more satisfactory in inguinal than in femoral hernia.

The other most fashionable operation at the present day for the radical cure, is the injection of a decoction of oak bark into and about the neck of the sac, so as to produce more or less inflammation and consequent deposit and organization of lymph, and thus close the opening. Which of the various operative procedures will prove best suited to fulfil its purpose, time must determine. In irreducible hernia, however, and in cases of strangulation in which a radical cure is attempted, there is of necessity none so suitable as that of suturing the sides of the ring, at the same time including the neck of the sac, and perhaps a stump of the omentum to assist in blocking up the hernial aperture.

REMARKABLE CASE OF OBSTETRICS— ABORTION AT TWO MONTHS AND QUADRUPLETS AT FULL TERM.

BY DRs. EDWARDS AND MCTAGGART, LONDON. ONT.

On the 21st of July of the present year we were called to see Mrs. S., of this city. Patient of small stature; English by birth; æt. 38; average weight, 100 lbs.; height, 5 feet, 1 inch. She is the mother of four living children, two boys and two girls—aged 12, 10, 8 and 7 years. There was nothing unusual at any of her previous confinements—never had an abortion before. On abdominal examination, we found the abdomen extremely enlarged and pendulous. We advised support

from the shoulders. She told us that she was but five months *eniente*; but from her history and condition we assured her that she was seven months pregnant. Patient always enjoyed good health; menses always regular. She last menstruated on Dec 4th, '82. About seven weeks from this time she commenced to flow, which lasted for some three weeks; this was accompanied with pain. With a pain somewhat resembling a labor pain, something was expelled, which she described "as a lump of flesh with bloodvessels in it." To this "lump" was attached a short "string." At this she became alarmed and consulted a medical man, who assured her that she had had a miscarriage. He prescribed some medicine, which he said would check the flow and remove anything that might remain. From her account, the flow increased for a few days, but finally stopped.

From this time until Friday, Sept. 14th, '83, she has been, comparatively speaking, quite well, although distressed by the immense size and weight of the abdomen. On the above mentioned date she was delivered of four living children—two boys and two girls, the time elapsing between the birth of the first and birth of the last child being one hour and forty-five minutes. The weight of the male children exceeded that of the females by a few ounces, the weight of the males being 4 lbs. 9¼ oz. and 4 lbs. 3 oz., and that of the females 4 lbs. 6 oz. and 3 lbs. 13¾ oz. Labor terminated favorably, there being no hæmorrhage to speak of. There was but one placenta, and each cord was inserted at different places on its surface.

The quartette are now six days old, all healthy and able to nurse, and all bid fair to live. The mother is doing exceedingly well, having suffered no more exhaustion than if she had had but one child. We might here say that the father, Mr. C. S., is English by birth, æt. 41, height 5 feet 5 inches, and average weight 169 lbs., is a strong, healthy and robust man.

Correspondence.

To the Editor of the CANADA LANCET.

SIR,—As the accompanying communication, addressed by me to the editor of the *Medical Times and Gazette*, may be regarded as an "open letter," may I ask the favour of its presentation in your