sation had ceased, and that the bruit was inaudible, the walls of the tumour having become hard and dense.

The subsequent progress of the case was most satisfactory. There was no recurrence of the pulsation in the tumour, when he embarked for the invalid dépôt on board H. M. S. Himalaya last September. The walls of the sac had become hard and dense, the tumour itself on measurement showed a considerable decrease in size, and he suffered no inconvenience except a slight numbness of the right leg.

It is rarely in practice that an errism of the femoral artery is found occupying so high a position, and it is in an eurisms so situated as the one here described that the superiority of the treatment by distal pressure, compared with that by proximal pressure, is so apparent.

The difficulty experienced by most surgeons of properly applying a compressor over the artery, above Poupart's ligament so as to efficiently control the circulation without manual assistance, and the certain supervention of sloughing from the protracted pressure, contrasts unfavourably with the facility with which a tourniquet can be applied at the distal side of the tumour either at the apex of Scarpa's triangle or the upper part of Hunter's canal; in the latter case sloughing from pressure cannot occur except through neglect of ordinary precautions, while in the former sloughing is unavoidable if the control of the circulation is to be efficiently maintained.

I believe that an important feature in the treatment of aneurism by compression, is the combination of the two modes of treatment as adopted in the case of the subject of this notice by the writer. As it is evident that there is less chance of the displacement or disintegration of the fibrous laminæ lining the sac if circulation is judiciously controlled at the proximal side of the aneurismal tumor.

The Citadel, Quebec, 26th December, 1865.

Successful Tracheotomy at the Marine Hospital, Quebec. By Dr. ROWAND. Reported by Dr. Anderson.

On the 5th November, 1864, Dr. Rowand, to whom I am indebted for opportunities of seeing many interesting cases and operations at the Marine Hospital, invited me to accompany him there to see a case of edema glottidis, in which he thought tracheotomy was immediately necessary.

On arrival at the hospital, we found the doctor's colleagues in attendance, in accordance with the rules of the institution, which require that