

the incision downwards and forwards in the course of the cicatrix, to obviate greater deformity, and then directly downwards, and by careful dissection I soon exposed the upper and more projecting part of the diseased mass. I continued my dissection to the lower angle of the wound, and was ably assisted by Dr. Temple who retracted the more important vessels and nerves, so as to enable me to get to the pedicle or root of the gland. Although the body of the gland did not partake of the fibro-cystic condition of the upper and more projecting portion, yet it was very considerably enlarged, projecting backwards and inwards, pressing strongly upon the œsophagus, larynx, and upper part of the trachea, and was very firmly attached to the lower and posterior border of the thyroid cartilage, and to the crico-thyroid membrane. During the latter part of the operation I was materially assisted by Dr. Temple seizing the body of the gland with a pair of toothed forceps, and drawing it outwards which enabled me to get at the root or firmest attachments.

Its removal required careful and minute dissection, and was effected in great measure by the finger and handle of the knife, with occasional touches of the blade.

There was a good deal of hæmorrhage during the operation, principally venous, but the external jugular having been divided in the first operation, I was saved from the risk of dividing that vessel. Two arteries, the superior and inferior thyroid, alone required ligatures, and a few twigs were twisted.

After the removal of the gland, the carotid, pneumogastric, œsophagus, the thyroid and cricoid cartilages were distinctly seen; the wound was left open until all oozing had ceased, and was then closed by several points of suture, a piece of dry lint, with a few strips of plaster and a bandage, completed the dressing.

I wish here to record my thanks to the two gentlemen who so ably assisted me, for short handed as we were, and a formidable operation, the difficulties would have been greatly increased, had they not anticipated every touch of the knife.

After the removal of the tumour it was found to be the right lobe of the thyroid gland entire, the upper half being about the size of an egg, and fibro-cystic in character, which formed the projecting portion, the cysts containing a grayish substance somewhat like sago in appearance and consistence, the upper and larger cyst having been torn by the forceps during its removal; the lower half, and that