

the receipt of a blow, and has increased gradually. Two months since, a Mr. Babington applied a ligature to the temporal artery, but they did not in any way check its progress."—No. 211, p. 762.

Mr. Wardrop tied the common carotid immediately, upon which the tumour ceased to pulsate, but did not contract.

Secondary hæmorrhage occurred on the fourth day after the operation, and required the most active exertions of Mr. Wardrop and his assistants to prevent its proving fatal. The patient escaped this danger, but the tumour suffered no amendment; and he died from some other cause, in the course of two months.

CASE III.—Is related by Dr. McLauchlan, in the second number of the *Glasgow Medical Journal*.

"W. Maclure, æt. 31, a discharged soldier. Soft, puffy, pulsating, and somewhat elastic swellings, of a varicose appearance, were found to occupy the course of the temporal, posterior auris, and occipital arteries, and their principal branches, each branch terminating by a tortuous extremity. These swellings could be made to disappear partly on pressure, but on its removal they speedily regained their former volume. They pulsated throughout their whole extent, and the pulsations were synchronous with those of the heart. By pressing on the common carotid, the pulsations ceased all along the swellings; and by interrupting the flow of blood through the temporal or posterior auris, the throbb was interrupted in corresponding parts of the tumour. They were not painful on being handled, but he complained much of the torture he had experienced for the last two months from the throbbing, which often deprived him of rest for nights together, and, as he said, made his existence miserable to him. The integuments covering the swellings were of their natural colour; only at those points which were most prominent, they had a slightly bluish red tinge. About ten years previously he had the temporal artery opened for an attack of ophthalmia. A small aneurismal tumour formed at the point of incision for the cure of which the artery was cut across lower down; but this not succeeding, the vessel was again exposed and the ligature applied. The little tumour disappeared only for the time; on its return it was but small, gave him no uneasiness, and although he served as a soldier for five years afterwards, he never complained of it to his surgeon."

Dr. McLauchlan tied the temporal artery, upon which the anterior and central portions of the tumour ceased to pulsate, and felt flaccid and doughy. But being apprehensive, from the extreme thinness and expansion of the coats of this vessel, that the obliterating process would not be effectually and safely performed, he, on the day following, tied the common carotid. The patient was soon afterwards seized with inflammation of the chest, which, notwithstanding the most free depletion and other active measures, proved fatal, on the fourth day after the operation.

CASE IV.—Was published by Mr. Syme, in the *Edinburgh Medical and Surgical Journal*, No. xcvi. in connexion with the preceding cases.

"About the middle of July, 1828, I was consulted by Mrs. T., aged 50, on account of a tumour about the size of a large goose berry, which was situated behind the right ear, over the mastoid process. I at first sight conceived this to be a common encysted tumour, which it exactly resembled, but upon compressing, discovered that the disease was of a very different nature. It readily yielded to the fingers and in its place there could be felt a considerable depression. So soon as the pressure was removed, it immediately filled again, and if the finger was gently applied while this took place, a jet of blood could be felt issuing from the

bottom of the tumour, and the patient heard such a whizzing noise, that she could hardly be persuaded the bystanders also did not perceive it. Below the tumour I felt the posterior auricular artery greatly enlarged, and throbbing with violence; when this vessel was compressed the tumour became flaccid. The patient complained of pain and noise in the swelling, the latter being often so distracting as to deprive her of sleep.

The swelling was first noticed after an accouchement about ten years ago. It had increased very gradually until of late, when its progress was more rapid. Several years ago she asked the opinion of several physicians and surgeons, who recommended pressure, which was accordingly tried, but without any advantage."

Mr. Syme tied the posterior auris a little below where it entered the tumour, which became flaccid and the dilated vessels disappeared.

On the eighth day after the operation, happening to press on the tumour, blood trickled away from the side of the ligature which ceased on applying pressure, it recurred twice in the twenty-four hours on the following day, and was arrested by the same means.

"For some weeks after the operation, the tumour remained small and flaccid, but when the patient resumed her ordinary diet and exercise, it began to resume its former condition. It was moderately tense; and though no throbbing in it could be felt with the finger, Mrs. T. complained of the noise and pain which had distressed her previously in a degree comparatively slight, but sufficient to disturb her repose. No appearance of the varicose dilatation of the artery could be perceived.

Finding that the uneasy symptoms continued to increase, and being anxious to take advantage of the command which had been obtained for the present over the disease by obstructing the principal supply of blood, I determined to take an effectual step for the patient's relief.

On the 29th of October, assisted by Professor Ballin-gall, I cut directly through the long direction of the tumour, which then showed itself to be composed of large irregular cells, invested by a firm capsule. While Dr. B. compressed above and below the tumour, I dissected it out, and then attempted to tie the vessels, but finding this very difficult, I adopted the suggestion of Dr. B., and included them in ligatures by means of a small curved needle. The ligature being drawn, the hæmorrhage ceased. I then filled the wound with dry caddis, and applied a firm bandage about the head. The patient did not experience the smallest inconvenience from the operation, excepting the pain immediately attending it. The ligature separated in about a fortnight, and the wound is now completely healed."

CASE V.—Is recorded by Dr. Gibson, of Philadelphia in his *Institutes and Practice of Surgery*, vol. II. p. 397.

"Elizabeth Laush, a married woman, twenty five years of age, residing in the neighbourhood of Reading, came to Philadelphia in the month of April 1823, anxious to obtain relief for a very large pulsating tumour, which nearly covered the right side of her head, and sometimes bled so profusely from numerous ulcerated spots on its surface, as frequently to endanger her life. This