Oct. 2nd.—There was now no discharge from the wound. Somethick-ening could be felt in the situation of the aneurism, but there was not the slightest pulsation. The pulsation in the posterior tibial artery continued natural. The skin of the leg still remained discoloured.

4th.—Feels quite well, and is in no pain. The wound has nearly healed.

6th.-Was allowed to get up.

13th.—Has had no unfavourable symptom since the last report. The discoloration of the limb has disappeared. He left the hospital apparently quite well.

The patient presented himself at the hospital on the 20th, and again on the 27th, when, with the exception of the scars of the original wound and of the acupressure needle, the limb was perfectly in its natural condition.

This occurred in a young man; it was a traumatic ancurism, and it was in a branch only of the main artery. It does not therefore follow that an ordinary aneurism of the popliteal artery would be cured by the same plan of treatment. On the other hand, it must be considered that this must have been a large branch, that it was very near its parent trunk, that it doubtless had its accompanying veins and nerves, and that these sustained no injury from the degree of pressure which was applied to them. Considering that an aneurism of this size and in this situation was so speedily and so completely cured by acupressure-considering that the degree of pressure required is not such as to stop the circulation, and taking into account the fact that an acupressure needle may at any moment be removed, the facts are, I think, sufficient to justify the trial of this mode of treatment in other cases of aneurism. Should increased experience confirm the à priori reasoning, there is, I think, little doubt but that it would be a simpler and more effectual way of pre venting the arterial impulse than any other hitherto practised.

In conclusion, I may mention that the needles best adapted for compressing large arteries are curved, with rounded, not cutting points These, when used, should be held firmly in a handle which can easily be removed. With a needle of this kind it is not easy to wound a large vessel in the living bedy.—Lancet.

Savile-row, October, 1866.

THE TREATMENT OF CANCER BY INJECTIONS.

By CHARLES H. MOORE, F.R.S., Surgeon to the Middlesex Hospital.

THE ingenious method of treating certain cancerous tumours communicated to the Association at its last annual meeting by Dr. Broad