

The isthmus was then freed to the inner side of each ligature, divided, and wholly removed, the trachea being observed to be quite free. There was not much bleeding, although several small veins ramified on the surface of the tumour. Subsequent examination showed the removed isthmus to be partly cystic in its character. For on section, one cyst especially was divided, giving exit to some fluid; the remaining portion looked like degenerated glandular tissue.

By the 14th the wound was nearly healed; on the 17th the ligature came away. A few days later the wound was perfectly healed, and she left the hospital, feeling no inconvenience about the trachea in breathing or swallowing. The relief afforded by the removal of the isthmus may be described as truly wonderful.

On the 16th November she called upon me in perfect health; she had got stouter, had married, and there was not a trace of her old symptoms. The trachea could be felt uninterruptedly free from the root of the neck upwards, and the enlarged thyroid gland on either side seemed to have receded from the median line, and was less prominent.

The results in this case fully justified the hopeful view entertained of the operation, and it was not long after that another opportunity was afforded of again trying its effects, under circumstances somewhat differing and even more unfavourable.

Alice D—, aged seventeen, a healthy-looking girl, was sent to me by my friend Mr. M. W. Chambers, of Sutherland-street, Warwick-square, with general swelling of the entire front part of the neck, especially above the clavicles, from enlargement of the thyroid gland, which, it appeared, had existed since her birth. Whilst there was an unusual fulness of the neck, there was not the great prominence observed in most cases of bronchocele; yet the swelling was traversed by numerous enlarged and tortuous veins, through its extension behind the clavicles and pressure upon the subclavian and other deep-seated veins. This gave rise to