of strangulation. In the event, too, of an error of diagnosis, the opening in the loins does not provide any facilities for correcting the error. The danger of total failure of affording relief consequent upon this state of things, must therefore be attributable as a demerit to the operation in the loins. There are, besides, the minor evils in operation, that the opening cannot be conveniently attended to by the patient himself, and that there exists frequently a great disposition to contraction, arising from the great depth of the wound, which requires renewed surgical interference. In all these particulars, with the exception of the necessary attendant of peritonæal section, the operation of opening the abdominal parietes at the groin, in all cases of obstruction, or suspected obstruction, in the lower part of the colon, appears to the author to be the operation which should be preferred. It affords facilities for modifying the treatment, either by opening the intestine, when incapable of relief by other means, or by dividing or removing any existing cause of strangulation. It enables the surgeon to extend his search within a limited range, in the event of the diagnosis proving incorrect; it allows him to open the bowel as close as possible to the seat of obstruction; and it secures to the patient the facilities for attending to his own comfort which appear almost a necessary condition to make life endurable under such circumstances.

TREATMENT OF TETANUS.

By Professor Miller.

[Speaking of the value of Cannabis Indica in this disease, Professor Miller says,]

I can now record three fortunate cases under its use; all traumatic. A girl, eleven years of age, sustained comminuted fracture of the finger. Tetanus occurred, the finger was amputated; and the treatment consisted of purgatives, cold to the spine, Indian hemp—pushed to narcotism—nourishment and seclusion. The amendment was gradual and complete. A boy, about the same age, had simple fracture of the thigh, with compound and comminuted fracture of the great toe. The treatment and result were the same. Another boy, rather older, had compound fracture of the bones of the arm. The treatment again resulted in cure. And in these cases I was and am inclined to award to the cannabis the greater part of the therapeutic agency. In other examples of the disease, I have seen it fail to cure, but never to relieve. It is given in doses of three grains of the extract, or thirty drops of the tincture; repeated every half hour, hour, or two hours; the object being to produce and maintain narcotism. There is a very marked tolerance of the remedy.—*Brit. and For. Medico-Chirurg. Review, Jan.* 1851.

PROTECTION OF GRANULATING SURFACES.

By the same.

[Professor Miller protects raw granulating surfaces "from the influence of the atmosphere, by imitating the incrustation of nature." This he does by using "a thick semifluid aqueous solution of gum tragacanth." This is]

Laid gently and uniformly on the raw surface, so as completely to protect it; and if at any portion the envelope threaten to become imperfect, the attendant is directed to effect an immediate repair. The application is productive of