

*the accident. Amputation of the thigh and recovery.*—William Walby 18; wounded himself with a pointed iron tool, which entered about an inch behind the inner edge of the tibia, and passed obliquely upwards and backwards to an uncertain depth. Profuse bleeding followed, but ceased spontaneously. When admitted, on Sept. 26, the limb was swollen and painful; the edges of the trifling wound in the skin adherent. 27th. Passed a restless night; tension and pain increased, pulse accelerated, V.S. to 12 oz. 12 leeches to leg. Oct. 1st. Leeches repeated on the 29th. Swelling, of incomprehensible hardness, occupies the whole back of leg. Heat and pain prevent rest at night; much constitutional disturbance. Aperient and saline draughts. 6th. 18 leeches applied on the 4th. Swelling and tension increased. Glands in groin enlarged and painful. Repeat leeches, as they have hitherto given temporary relief; they were also applied on 11th and 13th. 14th. Pain and distress being very urgent, the limb was carefully examined, when there being some softness, though no fluctuation, above the puncture, an incision was made to the depth of an inch and a half, but only a few drops of blood followed. 15th. A good night, no pain, and less tension. 20th. Leg becoming softer and free from pain; good rest at night. 22nd. A slight discharge of bloody matter from one corner of the incision, yesterday, a great deal escaped on enlarging the opening. Now a copious discharge of matter and blood. Rest at night with improved health. 24th. Considerable bleeding from wound yesterday, and since then an oozing of blood and matter; opening enlarged to ascertain source of bleeding which was considered venous. Faintness ensued and bleeding stopped. By the finger a boundless excavation was found under the calf. 26th. Slight discharge of blood and matter has continued. Arterial hemorrhage during the visit. It being certain that an important artery had been wounded, the question arose whether an attempt should be made to expose and secure it, or remove the limb. The latter was quickly decided, for on his removal to the operating theatre, he was so faint, that we had to wait some time, and give wine freely. The limb was amputated above the knee, wine being given freely during and after the operation. The pulse improved and he was better in the evening. He went on favorably and left in December.

*Examination of the Limb.*—A cavity, from the back of the knee to within 2 inches of the ankle, and the entire breadth of the limb, separated the muscles of the calf from those immediately covering the tibia and fibula; it contained a large mass and smaller portions of solid blood with about a pint of thickish fluid, a mixture of blood and matter. When these were removed and the surface washed, it looked reddish as if inflamed, and was covered by a smooth layer of fibrin. A part of the coagulum remained adherent to the tibia, just above its middle. The adhering basis was like the fibrin of the sac of an aneurism, and it stuck firmly. When removed it presented a smooth cavity as large as a hazel nut. In the space to which this corresponded were the posterior tibial artery and vein, each about half divided transversely. The aperture in the first was oval, and there was no coagulum above or below. The upper end of the vein was closed; but the lower, although containing a recent coagulum, allowed a probe to pass easily.