

region for the injection, which should be made deep and at a right angle to the surface. In every case, sooner or later, the guaiacol is tasted by the patient a few minutes after the injection. The author has also employed the carbonate of guaiacol, benzoyl guaiacol, and iodoform dissolved in guaiacol in the same manner, but concludes that these compounds have no special claims to therapeutic preference.

SURGERY.

IN CHARGE OF

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A LECTURE ON THE LINES OF ADVANCE IN ABDOMINAL SURGERY.

By J. KNOWSLEY THORNTON, M.B., C.M.,

British Medical Journal, Feb., 1896.

After some introductory remarks, Mr. Thornton said: "The one dread enemy of progress in surgery is conquered, thanks to Lister's indomitable perseverance and courage, and to the faithful disciples of many lands who have striven to follow his teaching. To-day we can, in the great majority of cases which require our aid by the use of antiseptics, keep asepsis.

Cases septic before they seek our help we can do much to purify. He expresses the belief that the time will surely come when we will possess some more potent and less irritating germicide than carbolic acid or corrosive sublimate. He ventures further to hope that pre-existent sepsis will some day be defeated from within instead of by the cruder and more painful method of external application. We must look for remedies which will so strengthen the vitality and resisting powers of the tissues, that micro-organisms shall be unable to spread from their local habitation into surrounding fluids and solid tissues. While waiting on the scientific physician, the bacteriologist and chemist, there is much which the surgeon unaided can do. The lecture is a consideration of the "what there is to do and the way to do it."

The Liver and Gall Bladder.—Under this head he considers: 1, operations on liver itself; 2, gall bladder and its ducts.

The liver is said to bear well the knife, the trocar, and the suture, and bleeding from its wounded surface is readily stopped by slight soft pressure, or bringing its injured surfaces gently together, or into contact with some other surface by fine sutures.

Hepatotomy is advocated for the treatment of hydatids, simple cysts and suppuration. Neoplasms of the liver are almost always malignant, so they do not afford scope for surgery.