

medical gentlemen at the inquest, with a full opportunity to learn all the symptoms it had developed; and if the profession generally have been in the daily practice of using it to counteract general and local inflammatory action, and, at the same time, were unaware or unmindful that its efficacy was owing to its powerful and purely sedative quality; I expect, if all this is so, how completely does it nullify any charge of culpable ignorance or rashness that can be brought against the prescriber? It further shows, too, that the Q. C., Col. Prince, in refusing to act upon the indictment found against him, exercised the combined virtues of charity, humanity and sound discretion.

I remain, Sir, yours,

ELAM STIMSON, M.D.

---

ART. XLVII. — *Rough Notes of a Clinical Lecture, delivered by DR. BEAUMONT, F.R.C.S., London, and one of the Surgeons to the Toronto General Hospital, on a case of False Aneurism. Reported from memory.*

Dr. Beaumont commenced by stating that he desired to make some observations on the case of traumatic aneurism which he was treating at the present time in the hospital. The difference between a false or traumatic aneurism and a true aneurism consisted in the one having been produced from a wound or injury in the artery, and the other having proceeded from disease of its coats. The case which he was about to bring under their notice was of the former description, and was a most interesting variety of that kind of disease; for the patient, who was a young man 20 years of age, by name Joseph Sterves, who it appeared had been stabbed in the left side of the neck with a bowie knife or some other sharp instrument. If they examined the patient they would see a tumour of about the size of a hen's egg, rather external to the line of the carotid artery and about an inch above the clavicle, the instrument having appeared to transfix the sterno-clido muscle. The summit of the tumour is marked by a cicatrix, and it has an evident pulsation. If they applied the stethoscope, they could distinctly hear the bruit-de-soufflet; in fact they might hear the rush in the tumour produced by the constant whirl of arterial blood as it enters, takes its course through the tumour, and finds an exit again into the blood vessels. They could compress the tumour so that the swelling could be emptied completely, and they might feel the impulse of the arterial blood again forced into the tumour by the heart's action. It was con-