

morrhoid equally curative with the other and just as strenuously demanding treatment. The third external kind is the serous pile. We have never seen it. Mr. Howship whose account is borrowed says,—It consists of a serous infiltration into the cellular tissue around the verge of the anus, around which it appears as a semi-transparent ring, and is peculiar to persons of low vital powers. Internal piles, says our author by some “are considered to resemble erectile tissue in structure, had they compared them to those abnormal developments of the vascular system termed aneurism by anastomosis, the analogy would have been more correct.” These then include the anatomical forms of hæmorrhoid and it is deserving of remark that the variety commonly entertained, viz., the varicose state of the veins is referred to a distinct chapter, and finds its place in the present one. The consequences and complications of piles are next described *seriatim*—under which titles some of the following phenomena will always be found co-existent, inflammation, pain, hæmorrhage, mucous discharge, ulceration, abscess, fistula, fissure, prolapsus and irritation propagated to other organs as the urethra, bladder, prostate gland and testicles in the male and to the vagina and womb in the female. The cause and symptoms are next entered upon at length and then the important subject of treatment is begun. In comparing the modes of radical cure, the following remarks are made in which we concur. “It is now generally admitted that excision is applicable only to external tumors, while the delegation, and in some cases the use of nitric acid are preferable in the removal of internal hæmorrhoids. But the operation itself is more rapidly performed, then the application of a ligature cannot be denied; but when we take into account the frequency of hæmorrhage and the necessity of applying ligatures to the bleeding vessel, or of making pressure, or of searing the wounded surfaces with red hot irons as practised by Dupuytren; there cannot be a question that the patient escapes on more easy terms and even more quickly when the ligature is used. The opponents of the ligature have imagined various evil consequences as following its application such as phlebitis, diffuse inflammation of the cellular tissue of the pelvis, peritonitis and tetanus, and have added instances where the application of ligatures was followed by fatal results: but they have neither verified their surmises as to the cause of death by post mortem examination, nor have they shown that the cases were such as justified surgical interference.”

The XII chapter gives a very good description of abscess near the rectum, but still there are several points that seems to us to have been overlooked. This is an affection deserving of careful study, because we believe that future experience will show many of the views now held