

HOSPITAL NOTES.

Montreal General Hospital.—On the *Medical* side the wards have been for some time unusually full of typhoid fever. The prevailing type this season has been mild: out of 102 cases treated during the past three months only four proved fatal—two from perforation, one from asthenia, and one from severe lung complications. Three cases of severe intestinal hemorrhage occurred; all recovered. One of them passed seven large stools of pure blood, and sank at once into profound collapse; he was rallied with stimulants, gallic acid was administered internally, and an ice bag applied to the abdomen. No further hemorrhage occurred, and the patient made a good recovery. The antiseptic treatment of typhoid seems to be the favorite just now. Acid Carbolic, Tinct. Iodin. aa gtt. ij., every two hours, well diluted with water, are given for two or three weeks, while the fever runs high. The urine must be carefully watched during the treatment; smokiness indicates the presence of carbolic acid; the mixture must then be stopped or the dose of acid reduced. Quinine in large doses is seldom used now. The diet is milk. Relapses are frequent, and are generally attributed to indiscretions in diet or injudicious haste in leaving bed. *Diphtheria* has been somewhat prevalent; about 20 cases have been treated during the last quarter; three deaths occurred. Tracheotomy was performed once in an apparently favorable case; the patient did well for two days, but the disease extended downwards into the trachea, and death took place 52 hours after the operation.

On the *Surgical* side, there has been lately rather a dearth of operative work. Ovariectomy has been performed this season six times; five patients recovered, one died from exhaustion on the sixth day after operation.

A case of fracture of the spine about the 8th dorsal vertebra, from a fall down a hoist, has attracted some attention; it was chiefly remarkable for the comparative absence of paralytic symptoms and the rapidity of recovery. There was paralysis of the bladder and rectum, but no paraplegia; only slight pains were felt running down the arms and legs. The patient left the hospital in six weeks:

Hôtel Dieu Hospital.—A good deal of surgery has been done at this hospital during the past

summer. One of the most interesting of the recent operations was the removal by Dr. Hingston of a firm, broad-based, fibrous nasopharyngeal polypus from a young man on the 14th ult. The polypus could be seen in front at the nasal aperture, and behind above the soft palate. The left ala was bulged out, and the hard palate pressed downwards. Dr. Hingston performed Professor Brun's operation in preference to that of Syme, so that less deformity might remain. An incision was made below the edge of the left ala and carried across the upper lip without wounding the mucous membrane of the mouth; a second one over the roof of the nose at the nasofrontal suture; and a third joining these two. With saw and bone scissors the hard parts were divided in the lines of incision through the soft parts: a vertical section of the septum was made, and with Langenbeck's Osteotome the whole nose was turned over till its tip rested against the right cheek. As this gave insufficient room, Dr. Hingston raised a portion of the periosteum of the left superior maxilla, and broke off the subjacent bone. The tumor was then detached, and, by means of a string, drawn out through the mouth. The hemorrhage was very great, and the patient seemed to be in danger of suffocation. The operation was completed, with patient's head and chest hanging down over the table. A fortnight after the operation, the patient was exhibited at the Medico-Chirurgical Society. The nose was back in its place as straight and firm as in health, very little trace of the operation being visible. Dr. Hingston said that the subsequent section of the supra maxillary bone gave sufficient room, and that by sacrificing bone but not periosteum, neither deformity nor depression remained.

Notre Dame Hospital.—The practice of this hospital is largely surgical, owing to its central situation and its proximity to the wharves. During the month of October there have been two amputations of the breast for scirrhus, a resection of the femur for the cure of an ununited fracture of four months standing, an operation for a congenital occlusion of the vagina by a membranous septum, an operation for congenital torticollis, and a number of others of less note. A vascular tumor of the eyelid was successfully treated by electrolysis. A large number of fractures, both simple and compound, are under treatment; the silica bandage is employed in several cases of simple fracture of the leg. An