

very urgent in his solicitations to be allowed to perform the operation and took some pains to explain to both herself and her friends, the folly of attempting to remove it by an *elliptical* incision, as recommended by one of the others, assuring her, that nothing but the crucial incision and mastely dissection would effect that object.

Under these circumstances she consulted me, and having ascertained the nature of the disease, I proposed curing it, without leaving a crucial cicatrix or indeed any mark that could be detected. To this proposal she gladly assented, and accordingly, on the 14th May, 1849, assisted by Dr. Brookes, of Sherbrooke, and Dr. McCallum, of this City, who were then my clinical clerks, I proceeded as follows: A hydrocele trocar was pushed into the tumour, and its contents emptied into a middle sized cupping glass, which they filled. On examination they were found to be composed of a turbid fluid, devoid of odour, with a quantity of thick cheesy, steatomatous matter floating through it. The sac being emptied, two or three probes, whose ends were coated with nitrate of silver were, in succession, introduced and freely applied to all parts of the cyst. A plug of lint was introduced into the opening, and water dressing applied. The next day, on the lint being removed, a quantity of sero-purulent matter, equal to one half of what the cyst contained the day before, was evacuated. The caustic was again applied and the wound similarly dressed. On two more occasions the same plan was adopted, and at each dressing the size of the cyst was perceptibly diminished. Pressure, by means of a compress and adhesive plaster were now applied, and complete obliteration of the cyst was effected at the end of a fortnight. It is now three years since the tumour was thus treated, and she has had no return of the disease, and I need not say, is much better pleased to be devoid of the vestiges of such skilful Surgery as that so disinterestedly recommended for her relief.

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ART. L.—*Two Cases of Ophthalmitis,—one Traumatic, the other Idiopathic.* By HENRY HOWARD, M.R.C.S.L., Ophthalmic and Aural Surgeon and Clinical Lecturer to St. Patrick's Hospital, Surgeon to the Montreal Eye and Ear Institution, Lecturer upon Ophthalmic and Aural Surgery, St. Lawrence School of Medicine.

On the eight of October, 1851, Mrs. B. brought her daughter, Miss B., aged 11 years, to consult me about her right eye, which had been perfectly blind for five years. The only history of the case that either mother or child could give was, that five years previously, by an accidental circum-