

it through the carotid—these being received as tokens of the operation having fulfilled the immediate objects for which it was undertaken. Three months are selected as a period of division between the first and second classes because it is sufficiently long to allow of recovery from the local effects of the operation, and because before danger ceases on their account the cause of death becomes embarrassed with the possibility that it may depend upon, or be in some way connected with them. These assumptions are supported by the authorities of Wardrop and Diday, the former says, “whenever coagulation of the blood in the tumor does take place, then the cure of aneurism may be said to be accomplished.” And the latter has fixed upon four months as the turning point of success or failure—for the reason given above, I have reduced the time, and because an additional month only serves to afford a little more stability to the changes previously established.

CLASS I.

Length of Life after Operation.	Delay in separation of Ligature.	Local Accidents.	Arrest of Circulation from Sac to Carotid.	Mode of Obliteration of Aneurism.	Surgeon.	Year.
1. Having 9 years after.	Cut away on 73d day.	Oedema & inflammation of arteries of right arm.	Perfect.	Fibrillation.	Evans, of Derby.	1828
2. 20 months	31st day	None.	Do.	Do.	Morrison of Buenos Ayres.	1834
3. 7 months.	26th day.	None.	Do.	Do.	Mott of New York	1830

These are the only cases that fall under this class, and their testimony on behalf of the operation is certainly favorable, but to set forth more fully the effects of the ligature upon the disease than can be expressed in a table, the following question may now be examined:—

In what condition is the aneurism placed by the operation? The immediate effects have been rather dissimilar in different cases—thus the tumor has been evidently diminished, (Mott) while in the majority there has been no appreciable decrease in its size. In none has enlargement ever been produced, thus disproving an opinion entertained by some that the operation might induce such an over-distention of the sac as would end in rupture. The pulsations have also, at first, been variously modified; generally speaking they were not lessened, but on one occasion became unusually violent (Morrison). These primary effects sooner or later, after the first day, were succeeded by signs of increasing hardness in the tumor, weakness in its pulsations, obscurity of its expansions, and reduction of its bulk. These latter changes are highly interesting, for they denote that the solidification of the aneurism is proceeding. The