

be entertained of their priority to the rest of the crops and hence of their *soi-disant* syphilitic origin.

3. The papillomata were situate in both the cases on the head, face including the eye-lids, extremities, trunk and genital parts, in fact over all the cutaneous surface of the body. Those on the face and scrotum were particularly broad-based, the biggest ones measuring up to 2 inches in length, $\frac{3}{4}$ inch in breadth and $\frac{1}{2}$ inch in elevation. The broad-based ones were covered with soft, thick and brownish crusts of epithelial debris which, on removal, presented, microscopically, a ragged granular surface that oozed out blood. The granular points were the summits of each single or branched papillae. These larger warts on mere ocular inspection hid their papillomatous nature, and were rather moist like those of mucous growths and unlike the smaller ones, which were hard and dry in their nature. The epithelial coverings of the smaller ones were somewhat adherent with the subjacent papillar hypertrophy, and could not be scraped off by an ordinary linen brush.

4. TREATMENT:

Local.—Owing to great numerical strength of these growths, excision and lively cauterization were thought painful operations. As the principle of treatment was based upon the use of any operation that can bring down the skin to its natural level, unattended with any amount of pain, I sought for this help from the application of the mild escharotic formula "Eau Phagedenique" of the French as given in the "Commentaires Therapeutiques du Codex Medicamentarius" by Dr. Gubler.

Corrosive Sublimate	...	4	grammes.
Distilled water	...	12	"
Aqua Calcis	...	125	"

The corrosive sublimate was first dissolved in the distilled water in a mortar and the lime water was subsequently added to it. It was daily prepared fresh in smaller quantities and applied over the warts by means of linen-brushes.

This preparation is nearly double the strength of the Lotoia flava of the British Pharmacopœia, but still by no means a local irritant. The hydrated peroxyde of mercury was the resulting agent that thus acted upon the warts.

Strong nitric acid was also applied over a few of the smaller warts, but to the dislike of the patients.

General.—One minim of Donovan's solution in an ounce of chiretta infusion was administered twice daily for a couple of weeks, followed by a course of Potass. Iodidi mixture. The latter drug brought on salivation on the older patient. The patients were discharged cured seven weeks after their admission.

Nearly two years subsequent to their discharge from the hospital, I was quite gratified to see them again the other day. The younger boy looked quite healthy, and without any marks on the skin to indicate the original seat of the warts, except on very careful scrutiny. The elder boy was then seen with two new growths of like nature in his left leg, but very insignificant.

5. *Remarks.*—Such a general spread of venereal warts is very uncommon, and I have to point out that the "Eau Phagedenique" proved locally of quicker potency in the broad-based and moist warts than in the smaller ones; that it did not produce any inconvenient sensation over the parts applied, and that it left no pitting or scar, but very slight traces on the seats of the growths. Since then I have used this Eau as a paint over condylomatous growths about the genitals and found it very useful and convenient.

18th August 1880.

SATKHIRA CHARITABLE DISPENSARY.

CASE No. I.—SEVERE INCISED WOUNDS; WOUND OF THE LUNG: RECOVERY.

By Assistant-Surgeon GIRISH CHANDRA BHAR.

Etraz Gazy, aged 20 years, was admitted into the hospital on the 9th June 1879. He had in all five incised wounds inflicted by a sharp cutting instrument (*dào*.) First, one on the right shoulder joint, measuring about $3\frac{1}{4}$ inches in length, $1\frac{1}{4}$ inches in breadth and 1 inch in depth, extending from before backwards down to the acromion process which was cut through by the inflicting weapon; this was a dangerous wound. Second, a small incised wound $1\frac{1}{2}$ inches in length on the posterior aspect of the right arm about $2\frac{1}{2}$ inches

above the elbow-joint. Third, a superficial incised wound $5\frac{1}{2}$ inches long over the right ilium, extending downwards from its crest to the sacrum. Fourth, there was a severe incised wound, crescentic in form, over the right lumbar region, measuring $4\frac{1}{2}$ inches in length. It is broader in the middle and deeper in the centre, extending from before backwards parallel with the crest of the ilium about 4 inches above it. Fifth, a gaping incised wound, measuring $4'' \times 1'' \times 2''$ on the right side of the back. It ran obliquely downwards, commencing from 2 inches below the inferior angle of the right scapula to 2 inches from the median line. It is deeper in the middle than on the extremities, and communicates with the lung posteriorly, a part of which is cut through, and from which air comes in and out during the act of respiration; this was a dangerous wound.

The wounds were sutured and dressed with carbolic acid and oil. Body bandage round the chest was applied, and $\frac{1}{4}$ grain morphia given at bed-time.

Diet.—Milk and sago.

On the following day he had fever, dyspnoea, groaning, accelerated pulse and moist tongue; was delirious, and talked incoherently.

R. Diaphoretic mixture ... \bar{z} i with
Pot. Bromid. ... gr. v.
every two hours.

Diet.—Milk, sago and chicken broth.

Delirium continued for two days.

On the 5th day he complained of cough, and had slight fever; there was much discharge from the wounds.

Tinct. Camph. Co. \bar{z} ss, was administered with the mixture. Dressing &c., as before.

On the 6th day no fever: cough and discharge much the same.

Quinæ Sulph. ... gr. v.
Acid Sulph. dil. ... ℥ x.
Tinct. Camph. Co. ... \bar{z} ss.
Aqua. ... \bar{z} i.
Mft. mist. one dose.

T. d.

The wounds healed kindly, and he was discharged quite cured on the 30th July, having been 52 days in hospital.

CASE No. II.—COMPOUND DISLOCATION OF THE LOWER EXTREMITY OF THE RIGHT HUMERUS AT THE ELBOW; EXCISION: RECOVERY.

Mockbool, aged 10 years, fell down from a height of about 7 feet to the ground and sustained the injury above indicated. The lower extremity of the right humerus gave way and protruded through a lacerated opening in front of the bend of the elbow-joint to the extent of an inch and a half, rupturing the brachialis anticus.

The boy was brought in and admitted on the second day of the injury into the hospital. The end of the humerus which protruded was sawn off under chloroform and the joint reduced.

The wound was dressed with carbolic oil and the arm was put up in an angular splint supported on pillows. All seemed to progress favourably when on the third day fever ensued and the joint swelled considerably, attended with pain and starting of the limb; the fever continued for two successive days.

The wound completely healed up, and he patient recovered the use of his arm.

CASES REPORTED BY KOILASH CHANDRA

MUKHOPADHYAY, M.B.

Case 1.—Craniotomy.

At about 10 o'clock one night I was called, at a distance of about ten miles from my place, to attend a case of labour in which operative interference seemed necessary to effect delivery. I took the necessary instruments, and, attended only by a nurse and a relative of the patient, reached the place at about 2 o'clock in the morning. I also took with me such medicines as were absolutely necessary, since these could not be had there. The patient was a multipara aged 36. None of her children was alive,—having died either before or after parturition. The labour had commenced three days