

After this the upper part of the finger gradually dried up and a line of demarcation clearly formed at the base of the part of the finger which had undergone a sort of dry gangrene after the separation of the nail. The line of demarcation is clearly indicated in the photograph.

The patient was admitted on the 6th January, 1923, and on the 19th January, 1923, at the request of the patient I cut off the gangrenous portion, just over the line of demarcation and there was no oozing of blood. The tissues beneath the dried skin presented a caseous appearance and contained a little creamy fluid. The bone exposed by the line of incision was cut off by bone nippers and showed the presence of a little blood, showing that this had not gangrened to the level of the superficial tissues. The patient made an uninterrupted recovery within a few days.

The case presents the typical clinical signs of Raynaud's disease. The three attacks occurred at intervals of about eight years. The œdema of the foot and the hand attacked preceded by a considerable time the manifestation of the sign of dry gangrene which is so characteristic of the disease. In different text-books which I have consulted with regard to the symptoms of the disease, none describes the variety of the disease preceded by symptoms of œdema a long time before the occurrence of dry gangrene, as was found in this case.

A CASE OF ABSENCE OF THE LEFT LUNG.

By KHAN SAHEB NUR MUHAMED,
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THE body of a woman named Akko, aged 19 years, sweeper caste, was sent by the police on the 10th January, 1923, for examination. She was said to have died on the 6th January by drowning in a well. On external examination there was only a Colles' fracture of the right wrist, and a few scratches on the upper part of the chest were present, which were probably produced after death whilst removing the body from the well.

The body was well developed; post-mortem rigidity was passing off but was present in the jaw muscles. The body was not decomposed. There was no deformity of any kind present. Both sides of the chest were symmetrical.

On opening the abdomen the liver was found ruptured for more than four inches in the right lobe and the spleen was found ruptured at its hylum for three inches; the peritoneal cavity was full of blood. The other organs were found normal. The stomach contained no fluid and no food.

On opening the chest the right lung was found most prominent and it was covering

the heart and extending over to the left side of the chest. The left lung was not evident as the pericardium was full of blood and most of the lower part of the cavity of the left side of the chest was occupied by the pericardium. On opening the pericardium and removing the blood I found that the heart was ruptured in both ventricles.

After removing the heart I searched for the left lung and found that a very thick pleura about 1½ inch thick was lining the upper part of the left side of the cavity of the chest. With the greatest trouble I separated the pleura from the chest wall and after opening it I found a small triangular cavity about 2 or 2½ inches long on each side of the triangle but no left lung.

It was then evening and I left the post-mortem unfinished to show the case to the Civil Surgeon as the condition was a novelty to me. I called upon the Civil Surgeon next morning and told him all about it but Colonel J. G. G. Swan, I.M.S., C.I.E., the Civil Surgeon, told me that he had never heard of such a thing before and he promised me to bring with him Major Keyworth, I.M.S., and both these officers came and found only one lung and the trachea entering the right lung direct without any division. They found a bilobular glandular structure on the left side of the cavity, which on microscopic examination was found to be the thymus gland but there was also present a prominent second thymus gland in its usual place lying in the anterior mediastinum, whilst the first thymus gland was lying in the thick pleura of the left side in the apex region.

The woman had lived for 19 years with only one lung. She was married. She appeared to have suffered no inconvenience from the absence of one lung. There was no evidence of illness (except that she was alleged to have been insane at times as elicited from her relatives). She was well nourished and there was no evident deformity of the chest from the middle of the spine to the middle sternal line, the measurement being 14½ inches exactly on both sides.

Section of the heart show normal muscle fibres with in places some pigmentary degeneration (brown atrophy).

FIVE CONSECUTIVE CASES OF TETANUS ENDING IN RECOVERY.

By RAO SAHIB R. S. TEMBE, L.M. & S., B.M.S.,

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Case No. 1.—Female, agricultural Hindu, developed symptoms on the 11th day after delivery. Treatment began two days later, when there was complete lockjaw and severe cramps of the muscles of the whole body. The temperature ranged between 101° and 103° F.